

925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768

Email: ethics@honolulu.gov

Website: http://www.honolulu.gov/ethics/

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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle	e)	
Alborg, Timothy E.		
LOBBYIST FIRM/EMPLO		TELEPHONE 770-595-0190
MAILING ADDRESS (No. and Street or P.O Box) 450 Geary Street Suite 200		FAX EMAIL tim.alborg@gmail.com
(City) San Francisco	(State) California	(Zip Code) 94102

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOB	BY FOR (Do not abbreviate)	TELEPHONE
Zagster, Inc.		770-595-0190
MAILING ADDRESS (No. and Street or P.O. Box) 450 Geary Street Suite 200		EMAIL tim.alborg@gmail.com
(City) San Francisco (State) California		(Zip Code) 94102

PART III EXPENDIT	TURES, BY TYPE		
	Amount 0.00	Receptions, Meals, Food & Beverages	Amount _{0.00}
Preparation & Distribution of Lobbying Materials	Amount _{0.00}	Media Advertising	Amount 0.00
Entertainment & Events	Amount 0.00	Other	
		TOTAL	

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING					
	HIH	E PURPOSE O			
Fees		Amount 0.0			
Compensation			Amount 4,0	00.00	
Contributions			Amount 0.0	0	
Membership Fees			Amount 0.0	0	
☐ Check here if additiona	l sheets	attached	□ n/a		
PART V DESCRIPT	ION C	F SUBJECTS	ON WHICH	YOU LOI	BBIED
☐Business & Economic Development		□Community Service		□Customer	34
□Culture & Arts		□Housing		□Public Wo Sustainabilit	rks, Infrastructure & y
□Parks & Recreation		□Public Health, Sat	fety & Welfare	□Tourism	
☑Transportation □Zoning & Planning		□ Specific Legislation: □ Additional Sheet(s) Attached Bill No(Year) Reso No Admin. Rule No Dept		nal Sheet(s) Attached(Year) No	
□Other (indicate below):					
PART VI POLICY M INFLUENCE AND O					GHT TO
1.Bill 57 (2018)	Outcor Pending	ne:	4.		Outcome:
2.	Outcor		5.		Outcome:
3.	Outcor	ne:	☐ Additional Sheet(s) Attached		nched
PART VII LOBBYIS	T CEL	TIEIC ATION			
PART VII LUBBTIS	CEF	TIFICATION			
I hereby certify that the foregoing statements are true and correct.		Subscribed and sworn to before me			
		This 10 day of January, 2019.		rang, 2019	
		By:	a Attachad Natarial C	.4751.4	
LOBBYIST SIGNATURE			*See Attached Notarial Certificate* NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS		-
1/10/19 DATE		My commission expires: May 26, 12020			

CALIFORNIA JURAT WITH AFFIANT STATEMEN	GOVERNMENT CODE § 8202
一个专家的工程设备不可以提出工工工程等加工工程的数据工程和工工程的工工程设施工程。 	市民等工程在重新的心理和最小的重要的的基础的人的复数作品 使自己的现在分词 经有效的
See Attached Document (Notary to cross out lines	1-6 helow)
See Statement Below (Lines 1-6 to be completed of	only by document signer[s], not Notary
Signature of Document Signar No. 1	
Signature of Document Signer No. 1	Signature of Document Signer No. 2 (if any)
A notary public or other officer completing this certificate veri	fies only the identity of the individual who signed the document
to which this certificate is attached, and not the truthfulness	, accuracy, or validity of the individual who signed the document
State of California	Subscribed and sworn to (or affirmed) before me
County of The	on this day of January 20 19
	by Date Month Year
	1) (Imothy E. Albora
James and the same	1. 1.2
DENNIS MUGWANYA Notary Public - California	(and (2)). Name(s) of Signer(s)
Alameda County	
My Comm. Expires May 26, 2020	proved to me on the basis of satisfactory evidence to be the person(s) with appeared before me.

	Signature
Place Notary Seal and/or Stamp Above	Signature of Notary Public
OPTIO	ONAL
Completing this information can d	eter alteration of the document as
fraudulent reattachment of this fo	orm to an unintended document.
Description of Attached Document	
	1-0:00
Title or Type of Document: Lobby 3	+ 2018 Annual Report
Document Date 110 2019	Number of Pages:
Signor(s) Other Than No.	D - 0
Signer(s) Other Than Named Above.	June

2017 National Notary Association



PART LOBBYIST

HONOLULU ETHICS COMMISSION

925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 98817

TEL: (808) 768-9242 FAX: (803) 768-7768 Email: ethics@honolulu.gov

Website: http://www.honolulu.gov/ethics/

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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 - Discember 31, 2018) (Type or Print Clearly)

NAME (Last) (First) (Middle	2)	AND THE RESIDENCE OF THE PARTY	ALERTA IN AND PROPERTY.		
Alexander, Daniel Anthony					
LOBBYIST FIRM/EMPLOY	ER. (if applicable)		TELEPHONE		
Hawaii Bicycling League 1/22/17			808-735-5756		
MAILING ADDRESS (No. 8	and Street or P.O Box)		FAX		
3442 Waialae Avenue, Suita 1					
			EMAIL daniel@	hbl.org	
(City) Honolulu	(State) HI		(Zip Code) 96	816	
PART II ORGANIZA	the date of the later and the same and the s	and the antiferent section of the 1996 and July 1996.	Mary State Co. State and Ass.	THE RESERVE AND ADDRESS OF THE PARTY OF THE	
NAME OF ORGANIZATION	N YOU LOBBY FOR (Do i	not abbreviate)	TELEPHONE		
Hawaii Bicycling League			808-735-5756		
MAILING ADDRESS (No. 8	and Street or P.O. Box)		FAX		
3442 Waialae Avenue, Suite 1			EMAIL.		
			bicycle@	hbl.org	
(City) Honolulu	(State)		(Zip Code) 96816		
	hadeksinnilde källistätä lähkällit parittällijä jagi Edeksääää. Alai me maksimi i 1111 m.	تتعسمه والمجانبان تابك الطهومية كالمسب المجاوية للجلد أستك		MIC prints to a facility security and a real print a security secu	
PART III EXPENDIT	TURES, BY TYPE			- The first the second control of the second	
Political Contributions	Amount 0	Reception & Beverage	is, Meals, Food	Amount 0	
Preparation & Distribution	Amount 0	Media Ad	vertising	Amount	
of Lobbying Materials Entertainment & Events	Amount 0	Other 🗆	0 Additional Sheet(s) Attached		
	NOTARY BUBLIC CERT	IEIEAFIAN			
a all	NOTARY PUBLIC First	Judiciai Oilo		Annual Schools on Andreas about Alast Annual strong and a	
Mir Do	nu G. Lee c. Description				
princes	o of PagesDate	of Doc.			
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-	Notary Signature OTE. This is a public document				
T.	TOTAL A C.A.				

Natary Signature

Lobbyist Annual Report Daniel Alexander Additional Information for Part VI Outcomes

Resolution 17-360 - passed in January 2018

Resolution 18-1 – passed in January 2018

Resolution 18-54 – passed in March 2018

Resolution 18-68 – passed in March 2018

Bill 7 (2018) - passed in May 2018

Bill 82 (2017) – passed by Council in May 2018, vetoed by Mayor in May 2018, Council failed to reconsider

Bill 15 (2018) - passed in June 2018

Bill 111 (2017) - passed in August 2018

Resolution 18-219 – passed in November 2018



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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBY	ST	
NAME (Last) (First) (Mi	ddle)	
ALIVADO, Shannon L.		
LOBBYIST FIRM/EMPL	OYER (if applicable)	TELEPHONE
Hawaiian Electric Com	pany, Inc.	808-543-4548
MAILING ADDRESS (No. and Street or P.O Box) P.O. Box 2750		FAX 808-203-1748
		EMAIL shannon.alivado@hawaiianelectric.com
(City) Honolulu	(State) HI	(Zip Code) 96840

PART II ORGANIZATI	ON	
NAME OF ORGANIZATION YO	OU LOBBY FOR (Do not abbreviate)	TELEPHONE
Hawaiian Electric Company, Inc.		808-543-4548
MAILING ADDRESS (No. and Street or P.O. Box)		FAX
P.O. Box 2750		
		EMAIL shannon.alivado@hawaiianelectric.com
(City) Honolulu	(State)	(Zip Code) 96840

PART III EXPENDITIONS Political Contributions	Amount 0	Receptions, Meals, Food & Beverages	Amount ₀
Preparation & Distribution of Lobbying Materials	Amount 0	Media Advertising	Amount
Entertainment & Events	Amount 0	Other	s) Attached
		TOTAL 0	

PART IV FEES, COI YOU RECEIVED FO					EMBERSHIP FEES
Fees		•	Amount		
Compensation		Amount			
Contributions			Amount		
Membership Fees			Amount		
☐ Check here if additiona	l sheets	attached	⊠ n/a		
PART V DESCRIPT	ION C	F SUBJECTS	ON WHICH	YOU LO	BBIED
□Business & Economic Development		□Community Service	ces	□Customer	Services
□Culture & Arts		□Housing		□Public Wo Sustainabilit	rks, Infrastructure & y
□Parks & Recreation		□Public Health, Saf	fety & Welfare	□Tourism	
				□Specific Lo	egislation: nal Sheet(s) Attached
□Transportation		□Zoning & Planning		Bill No Reso No Admin. Rule Dept	(Year) No
□Other (indicate below):					
PART VI POLICY M INFLUENCE AND O					ІСНТ ТО
1. None in 2018	Outcor		4.		Outcome:
2.	Outcor	me:	5.		Outcome:
3.	Outcor	me:	☐ Additional Sheet(s) Attached		ached
PART VII LOBBYIS	T CEF	RTIFICATION			
I hereby certify that the foreg			Subscribed an	d sworn to be	fore me
Than i	X. (All	This 19th day of <u>December</u> , 2018. By: <u>Lleboral Schirheta</u>		
December 19, 2018 DATE		NOTARY OR ANY	on File DEBC on expires:	ZED TO ADMINISTER OATHS	
Deadline: January 10 th of Each Year NOTE: This is a public document NOTE: This is a public document NOTE: This is a public document					

Doc. Date: Undated # Pages: 2

Name: Deborah Ichishita First Circuit

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Date 12/19/18 Date









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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST	
NAME (Last) (First) (Middle)	
Amemiya Ronald	
LOBBYIST FIRM/EMPLOYER (if applicable) Ironworkers Stabilization Fund	TELEPHONE 677-0375
MAILING ADDRESS (No. and Street or P.O Box) 94-497 Ukee Street	FAX 671-6901
	EMAIL
(City) Waipahu (State) Hawaii	(Zip Code) 96797

PART II ORGANIZAT	ION	
NAME OF ORGANIZATION	OU LOBBY FOR (Do not abbreviate)	TELEPHONE
Ironworkers Stabilization Fund		677-0375
MAILING ADDRESS (No. and Street or P.O. Box) 94-497 Ukee Street		FAX 671-6901
		EMAIL stab625@yahoo.com
(City) Waipahu (State) Hawaii		(Zip Code) 96797

PART III EXPENDIT	URES, BY TYPE		
Political Contributions	Amount 0	Receptions, Meals, Food & Beverages	Amount 0
Preparation & Distribution of Lobbying Materials	Amount 0	Media Advertising	Amount 0
Entertainment & Events	Amount 0	Other	
		TOTAL 0	

PART IV FEES, CON YOU RECEIVED FOI	IPEN R THI	SATION, CONT E PURPOSE O	TRIBUTION F LOBBYIN	S AND ME	MBERSHIP FEES
Fees		Amount			
Compensation		Amount 3000,00			
Contributions			Amount		
Membership Fees			Amount		
☐ Check here if additional	sheets	attached	□ n/a		
PART V DESCRIPTI	ON O	F SUBJECTS	ON WHICH	YOU LOB	BIED
■Business & Economic Development			ces	□Customer \$	Services
☐Culture & Arts		⊠ Housing		☑Public Wor Sustainability	ks, Infrastructure &
□Parks & Recreation		▼Public Health, Sa	fety & Welfare	□Tourism	
☑ Transportation		⊠ Zoning & Planning		Additional Sheet(s) Attached Bill No(Year) Reso No Admin. Rule No Dept	
PART VI POLICY M INFLUENCE AND O					GHT TO
1. N/A ^{3P}	Outco		4.	assea	Outcome:
2.	Outco	me:	5.		Outcome:
3,	Outco	ome:	☐ Additiona	nal Sheet(s) Attached	
PART VII LOBBYIS	TCE	RTIFICATION			
I hereby certify that the foregoing statements are true and correct.		Subscribed and sworn to before me This 22 ^M day of MARCH , 2019			
Renold 4. Ame my i LOBBYIST SIGNATURE MAR 22 2019			OFFICIAL AUTHOR	IZED TO ADMINISTER OATHE	
DATE		My commiss	ion expires:	O PUBLIC *	

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Deadline: January 16" of Each Year NOTE: This is a public decument

Doc. Date: 3/2/19 # Pages: 2
Name: Kathryn K. Koshi First Circuit
Doc. Description: 2018 | Milliant Page |

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2019 REGISTRATION

Lobbyist Registration (Type or Print Clearly)

PART I LOBBYIST	· · · · · · · · · · · · · · · · · · ·		
NAME (Last) (First) (Middle) Apo, Todd		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
LOBBYIST FIRM/EMPLOYER (if applicable) The Howard Hughes Corporation		TELEPHONE 808-591-8411	
MAILING ADDRESS (No. and Street or P.O Box) 1240 Ala Moana Blvd., Suite 200		FAX	
		EMAIL todd.apo@howardhughes.com	
(City) Honolulu	(State) HI	(Zip Code) 96814	
PART II.A ORGANIZATION			
NAME OF ORGANIZATION YOU LOBE The Howard Hughes Corporation	BY FOR (Do not abbreviate)	TELEPHONE 808-591-8411	
MAILING ADDRESS (No. and Street or 1240 Ala Moana Blvd., Suite 200	P.O. Box)	FAX	
,		EMAIL todd.apo@howardhughes.com	
(City) Honolulu	(State) HI	(Zip Code) 96814	
ESTIMATED NUMBER OF MEMBERS	(if lobbying on behalf of members)	➤ Not Applicable	
METHODS USED BY MEMBERS TO M	1AKE POLICY DECISIONS	☒ Not Applicable	
	11		

PART II.B NO LONGER LOBBYING	5-40-77
☐ I am no longer authorized to lobby on behalf of the organization in Part II.A	DATE

NOTE: This is a public document.

PART III DESCRIPTION O	F SUBJECTS ON WH	IICH YOU EXPECT TO LOBBY	
■Business & Economic Development	□Community Services	□Customer Services	
□Culture & Arts	⊠ Housing	☐Public Works, Infrastructure & Sustainability	
□Parks & Recreation	□Public Health, Safety & Well	fare □Tourism	
⊠ Transportation	⊠ Zoning & Planning	□Specific Legislation: □Additional Sheet(s) Attached Bill No(Year) Reso No Admin. Rule No Dept	
□Other (indicate below):			
DADTIN LODDING COLOR	ricio A Tiobi		
PART IV LOBBYIST CERT	IFICATION		
I hereby certify that the foregoing state correct. LOBBYIST SIGNATURE 2 2 1 1 9 DATE	OTAP!	day of <u>March</u> , 2019	
PART V AUTHORIZATION			
Simon Treacy	TITLE OF AUT REPRESENTE	HORIZING OFFICER OR PERSON D President	
NAME OF ORGANIZATION (if applicable) The Howard Hughes Corporation	TELEPHONE 808-591-8411		
MAILING ADDRESS (No. and Street 1240 Ala Moana Blvd., Suite 200	or P.O Box)	FAX	
		EMAIL simon.treacy@howardhughes.com	
(City) Honolulu	(Zip Code) 96814		
I hereby authorize the above-named (Signature of Authorizing Officer or Pe		ctivities on behalf of the undersigned. 3 2 9 (Date)	

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Document Date: Notariza Tru#Pages: 2 Notary Name: TRACEY K. MORISUGI First Circuit

Doc. Description: 2019 Registration Lubbyist

Registration (State of the S

NOTARY CERTIFICATION



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST	
NAME (Last) (First) (Middle)	
BARRETT, W. BRUCE	
LOBBYIST FIRM/EMPLOYER (if applicable)	TELEPHONE
CASTLE & COOKE HOMES HAWAII, INC.	(808) 548-4811
MAILING ADDRESS (No. and Street or P.O Box)	FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510	· · · · · · · · · · · · · · · · · · ·
	EMAIL bbarrett@castlecooke.com
(City) HONOLULU (State)	(Zip Code) 96817

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE	
CASTLE & COOKE HOMES HAWAII, INC.		(808) 548-4811	
MAILING ADDRESS (No. and Street or P.O. Box) 680 IWILEI ROAD, SUITE 510		FAX (808) 548-2975	
		EMAIL bbarrett@castlecooke.com	
(City) HONOLULU	(State) HI	(Zip Code) 96817	

PART III EXPENDIT			
Political Contributions	Amount 0.00	Receptions, Meals, Food & Beverages	Amount 0.00
Preparation & Distribution of Lobbying Materials	Amount 0.00	Media Advertising	Amount 0.00
Entertainment & Events	Amount 0.00	Other Additional Sheet	t(s) Attached
		TOTAL 0.00	

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEI YOU RECEIVED FOR THE PURPOSE OF LOBBYING					EMBERSHIP FEES
Fees		Amount 0.0	00		
Compensation			Amount 0.00		
Contributions			Amount 0.0	0	
Membership Fees			Amount 0.0	0	
☐ Check here if additiona	l sheets	attached	⊠ n/a		
PART V DESCRIPT	ION C	F SUBJECTS (ON WHICH	YOU LOE	BBIED
		□Community Service	ces	□Customer	Services
□Culture & Arts		⊠Housing		✓ Public Wo Sustainabilit	rks, Infrastructure & y
□Parks & Recreation		□Public Health, Sat	ety & Welfare	□Tourism	
		☑Zoning & Planning		□ Specific Legislation: □ Additional Sheet(s) Attached Bill No(Year) Reso No Admin. Rule No Dept	
□Other (indicate below):					
PART VI POLICY M INFLUENCE AND C					IGHT TO
1. None	Outcor		4.	,	Outcome:
2.	Outcor	ne:	5.		Outcome:
3.	Outcor	ne:	☐ Additional Sheet(s) Attached		
PART VII LOBBYIS	T CEF	RTIFICATION			HIMINING PATOMINI
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE DEC 13 2018 DATE		By: KYOKO PA	TOC, State of I	2018 * S	

Deadline: January 10th of Each Year 313 Kyoko Patoc First Judin NOTE: This is a public document OF Hyper Signature Day Signature Day



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle	e)	
Black Robert Brian		
LOBBYIST FIRM/EMPLOY	/ER (if applicable)	TELEPHONE
Civil Beat Law Center for	the Public Interest	808-531-4000
MAILING ADDRESS (No.	and Street or P.O Box)	FAX 808-380-3580
700 Bishop Street, Suite	1701	
		EMAIL brian@civilbeatlawcenter.org
(City) Honolulu	(State) HI	(Zip Code) 96813

PART II ORGANIZATI	ON		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) Civil Beat Law Center for the Public Interest		TELEPHONE 808-531-4000	
MAILING ADDRESS (No. and Street or P.O. Box) 700 Bishop Street, Suite 1701		FAX 808-380-3580	
		EMAIL info@civilbeatlawcenter.org	
(City) Honolulu	(State) HI	(Zip Code) 96813	

PART III EXPENDIT	Tolland Tolland		
Political Contributions	Amount	Receptions, Meals, Food & Beverages	d Amount
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount
Entertainment & Events			et(s) Attached
		TOTAL \$0	

Deadline: January 10th of Each Year NOTE: This is a public document

Rev. 11/2018

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEE YOU RECEIVED FOR THE PURPOSE OF LOBBYING				EMBERSHIP FEES		
Fees		Amount				
Compensation		Amount \$43.92				
Contributions		Amount				
Membership Fees			Amount	Amount		
☐ Check here if additiona	l sheets	attached	□ n/a			
PART V DESCRIPT	ION C	F SUBJECTS	ON WHICH	YOU LO	BBIED	
☐Business & Economic Development		□Community Servi		□Customer		
□Culture & Arts		□Housing		□Public Wo	rks, Infrastructure &	
□Parks & Recreation		□Public Health, Sa	fety & Welfare	□Tourism		
□Transportation □Zoning & Planning		g	□ Specific Legislation: □ Additional Sheet(s) Attached Bill No. 90 (Year) 2017 Reso No. Admin. Rule No. Police Comm'n R 10 Dept.			
□Other (indicate below):						
PART VI POLICY M INFLUENCE AND C					IGHT TO	
1. Bill 90 (2017)	Outcor	ne:	4.		Outcome:	
2. Police Comm'n Rules	Outcor	ne:	5.		Outcome:	
3.	Outcor		☐ Additional Sheet(s) Attached		ached	
PART VII LOBBYIS	TCEF	RTIFICATION	1			
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE 12-13-18		Subscribed and sworn to before me This 13 th day of December, 2018. By: Courtney loga NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER WATHS My commission, expires:				
DATE			03 25 2022			

ACKNOWLEDGMENT

STATE OF HAWAI'I)	
	:	SS
CITY AND COUNTY OF HONOLULU)	

On this 13th day of December, 2018, before me personally appeared Robert Brian Black, to me personally known, who being by me duly sworn, did say that such person executed the foregoing instrument as the free act and deed of such person, and if applicable, in the capacity shown, having been duly authorized to execute such instrument in such capacity.

Subscribed and sworn to before me this 13th day of December, 2018.



Courtney Vega

Printed Name of Notary

My commission expires: March 25, 2022

Doc. Date: December 13, 2018

Pages: <u>3</u>

Notary Name: Courtney Vega

First Circuit Doc. Description: 2018 Annual Report - Lobbyist Annual Report

NOTARY CERTIFICATION (FOR HAWAII NOTARY ONLY)





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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		
Caballero, Mateo		
LOBBYIST FIRM/EMPLOYER	(if applicable)	TELEPHONE
American Civil Liberties Union of I	Hawaii Foundation	808 522 5908
MAILING ADDRESS (No. and	Street or P.O Box)	FAX 808 522 5909
P.O. Box 3410		
		EMAIL mcaballero@acluhawaii.org
(City) Honolulu	(State) Hawaii	(Zip Code) 96801

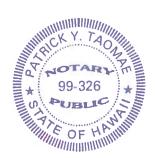
PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOB	TELEPHONE		
American Civil Liberties Union of Hawaii Foι	808 522 5900		
MAILING ADDRESS (No. and Street or	FAX SOO FOO FOOO		
P.O. Box 3410		808 522 5909	
		EMAIL office@acluhawaii.org	
City) (State) Hawaii		(Zip Code) 96801	

PART III EXPENDIT	TURES, E	BY TYPE			1
Political Contributions	Amount	\$0	Receptions, Meals, Food & Beverages	Amount	\$ 0
Preparation & Distribution of Lobbying Materials	Amount	\$0	Media Advertising	Amount	\$0
Entertainment & Events	Amount	50	Other	s) Attached	
			TOTAL \$0		

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING					
Fees	Fees		Amount & O		
Compensation		Amount \$ Z, 107.40			
Contributions		Amount	50		
Membership Fees		Amount \$	0		
☐ Check here if additional sheets	attached	□ n/a			
PART V DESCRIPTION O	F SUBJECTS	ON WHICH	YOU LO	BBIED	
☐Business & Economic Development	□Community Service	ces	□Customer	Services	
□Culture & Arts	□Housing		☑Public Wo Sustainabilit	rks, Infrastructure & y	
□Parks & Recreation	□Public Health, Saf	fety & Welfare	□Tourism		
□Transportation	□Zoning & Planning	3	□ Specific Legislation: □ Additional Sheet(s) Attached Bill No(Year)		
□Other (indicate below):					
PART VI POLICY MAKING				IGHT TO	
1. Bill 51 (2018) Outcom		4. Res 18-280		Outcome: Adopted	
2. Bill 52 (2018) Outcom Passed	ne:	⁵ . Res 18-281		Outcome: Pending	
	Outcome:		☐ Additional Sheet(s) Attached		
PART VII LOBBYIST CER	TIFICATION				
I hereby certify that the foregoing statements are true and correct. * LOBBYIST SIGNATURE		Subscribed and sworn to before me This day of, By: * See attached notary page. NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS		notary page.	
		By: * See	attached DFFICIAL AUTHORI	notary pa	

STATE OF HAWAII)
) SS.
CITY AND COUNTY OF HONOLULU)

The foregoing undated Honolulu Ethics Commission 2018 Lobbyist Annual Report consisting of two (2) pages was subscribed, sworn to, and acknowledged before me by MATEO CABALLERO in the First Circuit of the State of Hawaii on this <u>9th</u> day of <u>January</u>, 2019.



PATRICK Y. TAOMAE Notary Public, State of Hawaii

My Commission Expires: 6/30/2019



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768
Email: ethics@honolulu gov
Website: http://www.honolulu.gov/ethics/

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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST				
NAME (Last) (First) (Middle)				
Case, Ed				
LOBBYIST FIRM/EMPLOYER	(if applicable)	TELEPHONE		
Outrigger Hotels Hawaii		921-6616		
MAILING ADDRESS (No. and	Street or P.O Box)	FAX n/a		
2375 Kuhio Avenue				
		c/o scott.miyasato@outrigger.com		
(City) Honolulu	(State) HI	(Zip Code) 96815		

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE	
Outrigger Hotels Hawaii	921-6616		
MAILING ADDRESS (No. and Street or P.O. Box) 2375 Kuhio Avenue		FAX n/a	
		EMAIL scott.miyasato@outrigger.com	
(City) Honolulu (State) HI		(Zip Code) 96815	

Political Contributions	Amount \$11,900	Receptions, Meals, Food Amount 0		
Preparation & Distribution of Lobbying Materials	Amount 0	Media Advertising Amount 0		
Entertainment & Events	Amount 0	Other □Additional Sheet(s) Attached		
		TOTAL \$11,900		

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEE YOU RECEIVED FOR THE PURPOSE OF LOBBYING				EMBERSHIP FEES	
		Amount 0	10		
Compensation		Amount 0			
Contributions		Amount 0			
Membership Fees		Amount 0			
☐ Check here if additiona	l sheets	attached	□ n/a		
PART V DESCRIPT	ION C	F SUBJECTS	ON WHICH YOU LOBBIED		
☐Business & Economic Development		□Community Servi	ces	□Customer	Services
□Culture & Arts		□Housing		□Public Wo Sustainabilit	rks, Infrastructure & y
□Parks & Recreation		□Public Health, Sa	fety & Welfare	⊠Tourism	
□Transportation		□Zoning & Planning	€	B Specific Legislation: ☐ Additional Sheet(s) Attached Bill No	
□Other (indicate below):					
PART VI POLICY M INFLUENCE AND O					IGHT TO
^{1.} Bill 11 (2018)	Outcor	ne:	4.		Outcome:
2.	Outcor		5.		Outcome:
3.	Outcome:		☐ Additional Sheet(s) Attached		iched
PART VII LOBBYIS	T CEF	RTIFICATION			
I hereby certify that the foregoing statements are true and correct. Outrigger Hotels Hawaii, by OTRG Acquisition GP, LLC, its General Partner By Scott T. Miyasato, its SVP Scott T. Miyasato LOBBYIST SIGNATURE Viv [19] DATE		Subscribed and sworn to before me This day of		2 Cotto Chia	

STATE OF HAWAII
CITY AND COUNTY OF HONOLULU)
Subscribed and sworn to before me this 10 day of January, 2019 by Scott T. Miyasa To Notary Public, State of Hawaii Dorinda Dunlap My commission expires September 15, 2020
NOTARY CERTIFICATION STATEMENT
Doc. Date: 1/16/19 No. of Pages: 2 + His notary tage Dorinda Dunlan Invisdiction: First Circuit
Dorinda Dunlap Jurisdiction: First Circuit Printed Name of Notary
Document Identification or Description: Jouolule Ethics
Report Wornage Village January 10 2019 Signature of Notary Date of Notarization and

Certification Statement



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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ANNUAL REPORT

Lobbyist Annual Report (Type or Print Clearly)

PART I LOBBYIST				
NAME (Last) (First) (Middle	2)			TELEPHONE
Char, Susan M.	•			(808) 543-5865
MAILING ADDRESS (Street	et)			FAX (808) 203-1635
P. O. Box 2750		- And the property of the last		EMAIL susan.char@hawaiianelectric.co
(City) Honolulu	(Sta	ate) HI		(Zip Code) 96840
LOBBYIST FIRM/EMPLOY	ER (Fill in only if you are em	ployed by a business ent	ity that has been retained to lobby)	TELEPHONE
MAILING ADDRESS (No. a	and Street or P.O E	Вох)		FAX
				EMAIL
(City)	(Sta	ate)		(Zip Code)
PART II ORGANIZA	ATION			
NAME OF ORGANIZATION		R (Do not abbi	reviate)	TELEPHONE
Hawaiian Electric Company	10: 1 50:			FAV
MAILING ADDRESS (No. a	and Street or P.O E	Box)		FAX
P. O. Box 2750				EMAIL
(City) Honolulu	(Stat	te) HI		(Zip Code) 96840
PART III EXPENDIT	TURES. BY T	YPE		
Political Contributions	Amount -0-	R	eceptions, Meals, Food Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount -0-	M	edia Advertising	Amount -0-
Entertainment & Events	Amount -0-	Į,o	her01-10	
		TO	OTAL -0-	

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Deadline: January 10th of Each Year NOTE: This is a public document

THE AUG.

PART IV FEES, COMPE YOU RECEIVED FOR TH			NS AND MEMBERSHIP FEES
Fees		Amount -0-	St. 197
Compensation		Amount -0-	
Contributions		Amount -0-	
Membership Fees		Amount -0-	
☐ Check here if additional shee	ts are attached	⊠ n/a	
PART V DESCRIPTION	OF SUBJECTS	ON WHICH	YOU LOBBIED
☐Business & Economic Development	□Community Servi	ces	□ Customer Services
Culture & Arts	□Housing		□Public Works, Infrastructure & Sustainability
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism
		, min	☐Specific Legislation:
□Transportation	□Zoning & Planning	g	Bill No. (Year) Reso No. (Year) Admin. Rule No. Dept.
PART VI POLICY MAKININFLUENCE AND OUTC			YOU SOUGHT TO
1.		4.	
2.		5.	
3.		☐ Check her	e if additional sheets are attached
PART VII LOBBYIST CE	RTIFICATION	Little Communication of the Co	
I hereby certify that the foregoing s	statements are true	Subscribed ar	nd sworn to before me
Synma (THINING CANON	This 2Nd day of November, 2018. By: (1) Alto Al Ochillet	
LOBBYIST SIGNATURE	04-409	E REGREE SCIENCE	
11/2/18 DATE	E O PUBLIC	My commission	on expires:
	THE OF HAMIN	c odly 10, 20.	William College
Doc. Date: Undated Rev. 12/2017 Name: Deborah Ichishita Doc. Description: 2066	# Pages: <u>2</u> Deadinguit NOTE: This is a	y 10 th of Each Y public documer	rear 04-409
Debnes Jekith	te 11/2/18		The state of the s



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TEL: (808) 768-9242 FAX: (808) 768-7768
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Website: http://www.honolulu.gov/ethics/

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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		
CHENG, NORMAN H.Y.		
LOBBYIST FIRM/EMPLOYE	R (if applicable)	TELEPHONE
STARN O'TOOLE MARCUS & FISHER		(808) 537-6100
MAILING ADDRESS (No. and Street or P.O Box)		FAX (808) 537-5434
733 BISHOP STREET, SUITE	1900	
		EMAIL ncheng@starnlaw.com
(City) HONOLULU	(State) HAWAII	(Zip Code) 96813

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
PARK HOTELS & RESORTS INC.		(571) 302-5757
MAILING ADDRESS (No. and Street of	r P.O. Box)	FAX
1775 TYSONS BLVD., 7TH FLOOR		
		EMAIL
(City) TYSONS	(State) VIRGINIA	(Zip Code) 22102

Political Contributions	Amount 0	Receptions, Meals, Food & Beverages	Amount 0
Preparation & Distribution of Lobbying Materials	Amount 0	Media Advertising	Amount 0
Entertainment & Events	Amount 0	Other Additional Sheet(s	s) Attached
		TOTAL 0	

THE TORT OUE O	F LOBBYIN	NG	
	Amount 0		
	Amount 0		
Contributions			
	Amount 0		,
neets attached	□ n/a		
N OF SUBJECTS	ON WHICH	YOU LOE	BBIED
T			
□Housing			rks, Infrastructure &
□Public Health, Sat	fety & Welfare	□Tourism	
☐Transportation ☐Zoning & Planning		□ Specific Legislation: □ Additional Sheet(s) Attached Bill No(Year) Reso No Admin. Rule No Dept	
			GHT TO
utcome:	4.		Outcome:
utcome:	5.		Outcome:
utcome:	☐ Additional	Sheet(s) Attached	
CERTIFICATION			
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE DATE		Subscribed and sworn to before me This 8 ^H 1 day of January, 2019 By: Burnalelle G Lee NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS My commission expires:	
	N OF SUBJECTS (☐ Community Service ☐ Housing ☐ Public Health, Sate ☐ Zoning & Planning ☐ Zoning & Planning ☐ COME (e.g., Bill) utcome: utcome: utcome:	Amount 0 N OF SUBJECTS ON WHICH Community Services Housing Public Health, Safety & Welfare Zoning & Planning (ING PROCESS DECISIONS TCOME (e.g., Bill X (2018), pautcome: 4. utcome: 5. utcome: CERTIFICATION ag statements are true Subscribed an This Land By: NOTARY OR ANY OR My commission	Amount 0 Amount 0 Amount 0 Amount 0 Amount 0 NOF SUBJECTS ON WHICH YOU LOB Community Services Customer

NOTARY CERTIFICATION STATEMEN	T
Doc. Date: January 8, 2019 Undate	ed at time of notarization
Document Description: Honolulu Ethics Co	mmission - 2018 Annual
Report (Norman H.Y. Cheng)	
No. of Pages: 3	
Jurisdiction: First Judicial Circuit	
Honolulu, Hawaii	19/1 2 4 1 1
Bundette a. Lu	January 8, 2019
Signature of Notary	Date of Notarization and
	Certification Statement
BERNADETTE A. LEE	(Official Stamp or Seal)
Printed Name of Notary	0



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		
Ching, Meredith J.		
LOBBYIST FIRM/EMPLOYER		TELEPHONE
Alexander & Baldwin	1p yk3/19	525-6669
MAILING ADDRESS (No. and	Street or P.O Box)	FAX 525-6677
P.O. Box 3440		
		EMAIL mching@abhi.com
(City) Honolulu	(State) HI	(Zip Code) 96801

PART II ORGANIZA	TION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE	
Alexander & Baldwin		525-6669	
MAILING ADDRESS (No. ar	nd Street or P.O. Box)	FAX 525-6677	H
P.O. Box 3440		525-0077	
14-		EMAIL mching@abhi.com	
(City) Honolulu	(State) HI	(Zip Code) 96801	

Political Contributions	Amount 0	Receptions, Meals, Food & Beverages	Amount 0
Preparation & Distribution of Lobbying Materials	Amount 0	Media Advertising	Amount 0
Entertainment & Events	Amount 0	Other Additional Sheet	s) Attached
	Mary Probability	TOTAL 0	

PART IV FEES, CO YOU RECEIVED FO					EMBERSHIP FEES
Fees			Amount \$0		
Compensation		Amount \$24	40.00		
Contributions		Amount \$0	A Brus		
Membership Fees			Amount \$0		
☐ Check here if additiona	sheets	attached	□ n/a		
PART V DESCRIPT	ION C	F SUBJECTS	ON WHICH	YOU LO	BBIED
⊠Business & Economic Development		□Community Servi	ces	□Customer	Services
□Culture & Arts		⊠Housing		⊠Public Wo Sustainabilit	rks, Infrastructure &
□Parks & Recreation		□Public Health, Sa	fety & Welfare	□Tourism	
⊠Transportation	nsportation □Zoning & Plannin		g	□ Specific Legislation: □ Additional Sheet(s) Attached Bill No(Year) Reso No Admin. Rule No Dept.	
PART VI POLICY MINFLUENCE AND C					IGHT TO
1. Bill 110 (2017) JP 1/23	Outcor Passed		4.		Outcome:
2. Bill 16 (2018) 10 1/23	Outcor Passed	ne:	5.		Outcome:
3.	Outcor	ne:	☐ Additional	dditional Sheet(s) Attached	
PART VII LOBBYIS	T CEF	RTIFICATION			
I hereby certify that the fore and correct. LOBBYIST SIGNATURE 12/14/18 DATE	going sta	atements are true	By: Clery	OFFICIAL AUTHORI	CHERYE A. ONISHI ZED TO ADMINISTER OATHS Pages: Cheryl A. Onishi First Circuit

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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST			
NAME (Last) (First) (Middle)	- .		
Choe, Francis H.			
LOBBYIST FIRM/EMPLOYER	(if applicable)	TELEPHONE	
Hawaiian Telcom Communications, Inc.		808.546.3868	
MAILING ADDRESS (No. and	Street or P.O Box)	FAX	
1177 Bishop Street, Suite 15			
		Francis.choe@hawaiiantel.com	
(City) Honolulu	(State) HI	(Zip Code) 96813	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE	
Hawaiian Telcom Communications, Inc.		808.546.3868	
MAILING ADDRESS (No. and Street or P.O. Box)		FAX	
1177 Bishop Street, Suite 15		EMAIL francis.choe@hawaiiantel.com	
(City) Honolulu	(State) HI	(Zip Code) 96813	

PART III EXPENDITURES, BY TYPE				
	Amount 0.00	Receptions, Meals, Food & Beverages	Amount _{0.00}	
Preparation & Distribution of Lobbying Materials	Amount 0.00	Media Advertising	Amount 0.00	
Entertainment & Events	Amount 0.00	Other □Additional Sheet(s) Attached		
		TOTAL 0.00		

YOU RECEIVED FOR THE PURPOSE OF Fees		Amount 0.00				
Compensation		Amount 0.00				
Contributions		Amount 0.00				
Membership Fees		Amount 0.00				
☐ Check here if additional sheets attached		⊠ n/a				
PART V DESCRIPT	ION C	F SUBJECTS	ON WHICH	YOU LO	BBIED	
□Business & Economic Development		□Community Servi	ces	□Customer Services		
□Culture & Arts		□Housing	□Public We Sustainabili		orks, Infrastructure &	
□Parks & Recreation		□Public Health, Sa	fety & Welfare	□Tourism		
□Transportation		□Zoning & Planning		□ Additional Sheet(s) Attached Bill No(Year) Reso No Admin. Rule No Dept		
□Other (indicate below):				Reso No Admin. Rule	No	
PART VI POLICY M		G PROCESS D	ECISIONS X (2018), pa	Reso No Admin. Rule Dept	No	
PART VI POLICY M	OUTCO	G PROCESS D	ECISIONS	Reso NoAdmin. Rule Dept YOU SOU	No	
PART VI POLICY MINFLUENCE AND C	OUTCO	G PROCESS D DME (e.g., Bill)	ECISIONS X (2018), pa	Reso NoAdmin. Rule Dept YOU SOU	IGHT TO	
PART VI POLICY M	Outcor	G PROCESS D DME (e.g., Bill) ne:	ECISIONS X (2018), pa	Reso NoAdmin. Rule Dept YOU SOU assed)	Outcome:	
PART VI POLICY MINFLUENCE AND Co	Outcor Outcor	G PROCESS D OME (e.g., Bill) ne: ne:	ECISIONS X (2018), pa	Reso NoAdmin. Rule Dept YOU SOU assed)	No IGHT TO Outcome: Outcome:	

Doc. Date: 12/11/18 # Pages:_	2
Na GENENDOLYN A. MASSIAH 15	Circuit
Doc. Description: 2018 Lobbyrst Annua	Report

Signature / 12/17/18 Date

NOTARY CERTIFICATION





925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/

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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		
Choe, Francis H.		
LOBBYIST FIRM/EMPLOYER	(if applicable)	TELEPHONE
Hawaiian Telcom Services Company, Inc.		808.546.3868
MAILING ADDRESS (No. and	Street or P.O Box)	FAX
1177 Bishop Street, Suite 15		
		EMAIL francis.choe@hawaiiantel.com
(City) Honolulu	(State) HI	(Zip Code) 96813

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE	
Hawaiian Telcom Services Company, Inc.		808.546.3868	
MAILING ADDRESS (No. and Street or P.O. Box)		FAX	
1177 Bishop Street, Suite 15		EMAIL francis.choe@hawaiiantel.com	
(City) Honolulu	(State) HI	(Zip Code) 96813	

PART III EXPENDITURES, BY TYPE				
Political Contributions	Amount 0.00	Receptions, Meals, Food & Beverages	Amount _{0.00}	
Preparation & Distribution of Lobbying Materials	Amount 0.00	Media Advertising	Amount 0.00	
Entertainment & Events	Amount 0.00	Other □Additional Sheet(s) Attached		
· · · · · · · · · · · · · · · · · · ·		TOTAL 0.00		

PART IV FEES, CO YOU RECEIVED FO					EMBERSHIP FEES
Fees		Amount 0.00			
Compensation		Amount 0.00			
Contributions		Amount 0.0	0		
Membership Fees		Amount 0.00			
☐ Check here if additional sheets attached		ĭ n/a			
PART V DESCRIPTION OF SUBJECTS		ON WHICH	YOU LOE	BBIED	
□Business & Economic Development □Community Servic			□Customer	·	
□Culture & Arts		□Housing		□Public Wo Sustainabilit	rks, Infrastructure &
□Parks & Recreation		□Public Health, Sat	fety & Welfare	□Tourism	
☐Transportation ☐Zoning & Planning		9	Bill No Reso No Admin. Rule	egislation: nal Sheet(s) Attached(Year) No	
□Other (indicate below):					
PART VI POLICY MAKING PROCESS D INFLUENCE AND OUTCOME (e.g., Bill)					IGHT TO
			4.		Outcome:
2.	Outcor	ne:	5.		Outcome:
3.	Outcor	me:	☐ Additional Sheet(s) Attached		
PART VII LOBBYIS	T CEF	RTIFICATION			
I hereby certify that the foregoing statements are true and correct. HAIREN LOBBYIST SIGNATURE		Subscribed and sworn to before me This 17th day of December, 2018. By: NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS My commission expires:			
DITTE		Doadling: January	FEB. 22, 2020	certification	on bek 3. de ** DELIC **

Doc. Date: 12/17/18 # Pages: 2
Name: WENDOLYN A. MASSIAH 1st Circuit
Doc. Description: 2618 Lubby tot Annel Report

Signature ALCTARY CERTIFICATION Date

NOITASI YRATON





925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		
Choe, Francis H.		
LOBBYIST FIRM/EMPLOYER (if applicable)		TELEPHONE
Hawaiian Telcom, Inc.		808.546.3868
MAILING ADDRESS (No. and	Street or P.O Box)	FAX
1177 Bishop Street, Suite 15		
		EMAIL francis.choe@hawaiiantel.com
(City) Honolulu	(State) HI	(Zip Code) 96813

PART II ORGANIZATION	·	
NAME OF ORGANIZATION YOU LOBE	BY FOR (Do not abbreviate)	TELEPHONE
Hawaiian Telcom, Inc.		808.546.3868
MAILING ADDRESS (No. and Street or	P.O. Box)	FAX
1177 Bishop Street, Suite 15		EMAIL francis.choe@hawaiiantel.com
(City) Honolulu	(State)	(Zip Code) 96813

PART III EXPENDITURES, BY TYPE				
ľ	Amount 0.00	Receptions, Meals, Food & Beverages	Amount _{0.00}	
Preparation & Distribution of Lobbying Materials	Amount _{0.00}	Media Advertising	Amount 0.00	
Entertainment & Events	Amount 0.00	Other □Additional Sheet(s) Attached	
	SI SI	TOTAL 0.00		

Deadline: January 10th of Each Year NOTE: This is a public document

Rev. 11/2018

PART IV FEES, COI YOU RECEIVED FO					EMBERSHIP FEES
Fees			Amount 0.0	00	
Compensation			Amount 0.0	Amount 0.00	
Contributions			Amount 0.00		
Membership Fees		Amount 0.00			
☐ Check here if additional sheets attached		⊠ n/a			
PART V DESCRIPT	ION C	F SUBJECTS	ON WHICH	YOU LOF	3BIED
☐Business & Economic Development		□Community Service		□Customer	
□Culture & Arts		□Housing		□Public Wo Sustainabilit	rks, Infrastructure &
□Parks & Recreation		□Public Health, Saf	fety & Welfare	□Tourism	
□Transportation		□Zoning & Planning		□ Specific Legislation: □ Additional Sheet(s) Attached Bill No(Year) Reso No Admin. Rule No Dept	
□Other (indicate below):					
PART VI POLICY M					GHT TO
1.	Outcor		4.		Outcome:
2.	Outcor	ne:	5.		Outcome:
3.	Outcor	ne:	☐ Additional	Sheet(s) Attached	
PART VII LOBBYIS	T CEF	RTIFICATION			
I hereby certify that the foregoing statements are true and correct. HAIZZAN LOBBYIST SIGNATURE		Subscribed and This 1744 day			
DATE			My commissio	20	DA Mack South

Deadline: January 10th of Each Year NOTE: This is a public document

Thumanum.

Doc. Date: 12/17/18 # Pages: 2
NameWENDOLYN A. MASSIAH 15+ Circuit
Doc. Description: 2018 Labbyrst Annual Report

Signature 12/17/18
Date

NOTARY CERTIFICATION





925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIS	T	
NAME (Last) (First) (Mid	dle)	
Chong, Dwight P.		
LOBBYIST FIRM/EMPLO	OYER (if applicable)	TELEPHONE
Hawaii Medical Service Ass		808-948-7599 -152 D
MAILING ADDRESS (No 818 Keeaumoku St.	o. and Street or P.O Box)	FAX 808-948-7580
		EMAIL Pono_Chong@hmsa.com
(City) Honolulu	(State) HI	(Zip Code) 96814

PART II ORGANIZA	TION		
NAME OF ORGANIZATION	YOU LOBBY FOR (Do not abbreviate)	TELEPHONE	
Hawaii Medical Service Association		808-948-7599	
MAILING ADDRESS (No. and Street or P.O. Box)		FAX	
818 Keeaumoku St.		808-978-7580	
		EMAIL	
(City) Honolulu	(State)	(Zip Code)	
		96814	

	Amount 0.00	Receptions, Meals, Food & Beverages	Amount 0.00
or read Audio Materials	Amount 0.00	Media Advertising	Amount 0.00
Entertainment & Events	Amount 0.00	Other	

Rev. 11/2018

PART IV FEES, COI YOU RECEIVED FO	VIPEN R THE	SATION, CON E PURPOSE O	TRIBUTION F LOBBYIN	IS AND MI IG	EMBERSHIP FEES
Fees			Amount 0.0	0	
Compensation		Amount 2,5	Amount 2,500.00		
Contributions		Amount 0			
Membership Fees		Amount 0	Amount 0		
☐ Check here if additional sheets attached		□ n/a	□ n/a		
PART V DESCRIPT	ION O	F SUBJECTS	ON WHICH	YOU LOE	BBIED
☐Business & Economic ☐Community Service ☐Development			□Customer	Services	
□Culture & Arts		□Housing		□Public Wor Sustainability	rks, Infrastructure &
□Parks & Recreation		☑Public Health, Sa	fety & Welfare	□Tourism	
				1	nal Sheet(s) Attached
☐Transportation		☑Zoning & Plannin	g	Admin. Rule	No
☐Other (indicate below):					
PART VI POLICY N					IGHT TO
1.	Outco		4.		Outcome:
2.	Outco	me:	5		Outcome:
3.	Outco	me:	☐ Additiona	☐ Additional Sheet(s) Attached	
DARTWILORDY	TOP	DTIEICATION	1		L. S.
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE		Subscribed and sworn to before me This 4-th day of January, 2019. By: NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER DATHS KNYWONY JONAS			
DATE	(3 1		My commissi	70	tion on separate pa

STATE OF HAWAII)		
01771 0 000000) SS.		
CITY & COUNTY OF HONOLULU	<i>J</i>)		
Dwight P. Cha	being first duly swo	rn on oath, deposes and	says:
	ney is/are the affiant herein;		
2. That he/she/th	ney is/are a resident of the City	and County of Honolulu	. State of Hawaii
o. mat ne/spe/th	rey has read the affidavit and k	nows the contents there	of and
4. That the said a	ffidavit is true to the best of th	e affiant's knowledge an	d belief
Further affiant sayeth r		Affiant signature	8
This 3 page 2018 LCb	Dyist Annual Report		
dated January 3,20			
to before me this 3rd day o		<u>19</u> ,	Seal
in the First Circuit of the State of	Hawaii, by <u>DWIGHTP.CI</u>	rong.	
KINNLYALA JENIALA Kimberly Jonas / Notary Public, State of Hawaii My commission expires 10/23/20			



HONOLULU ETHICS COMMISSION 925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honoiulu gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 - December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST				
NAME (Last) (First) (Middle)				
Chow, Tabatha				
LOBBYIST FIRM/EMPLOYER (if applicable) Uber Technologies, Inc. and Affiliates	TELEPHONE 202-794-7387			
MAILING ADDRESS (No. and Street or P.O Box) 615 Pilkoi St, #402	FAX			
401 Karrakee st. #413 fe	EMAIL tabatha@uber.com			
(City) Honolulu (State) HI	(Zip Code) 96814			

PART II ORGANIZATI	ON	
NAME OF ORGANIZATION YO	OU LOBBY FOR (Do not abbreviate)	TELEPHONE
Uber Technologies, Inc. and Affiliates		202-794-7387
MAILING ADDRESS (No. and Street or P.O. Box)		FAX
1455 Market Street, 4th Floor		EMAIL daviswhite@uber.com
(City) San Francisco	(State) CA	(Zip Code) 94103

PART III EXPENDIT			
Political Contributions	Amount 0	& Beverages	Amount 0
Preparation & Distribution of Lobbying Materials	Amount 0	Media Advertising	Amount
Entertainment & Events	Amount 0	Other Additional Sheet(s) Attached
		TOTAL \$0	

Rev. 11/2018

PART IV FEES, CON YOU RECEIVED FO	IPEN R THI	SATION, CONT E PURPOSE OI	RIBUTION F LOBBYIN	IS AND ME	EMBERSHIP FEES
Fees		Amount 0			
Compensation			Amount \$9	086.54	
Contributions			Amount 0		
Membership Fees			Amount 0		
☐ Check here if additional	sheets	attached	□ n/a		
PART V DESCRIPTI	ON O	F SUBJECTS	ON WHICH	YOULOF	RRIED
☐Business & Economic Development		□Community Service		Customer	
□Culture & Arts		□Housing		□Public Wor	rks, Infrastructure &
□Parks & Recreation		□Public Health, Sat	fety & Welfare	□Tourism	
≊ Transportation		□Zoning & Plannin	g	□Specific Legislation: □ Additional Sheet(s) Attached Bill No. (Year) Reso No. Admin. Rule No. Dept.	
PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME (e.g., Bill X (2018), passed)					IGHT TO
Transportation Network Con	Outcor	me:	4.	accou,	Outcome:
2.	Outcor	me:	5.		Outcome:
3.	Outcor	me:	☐ Additional Sheet(s) Attached		ached
PART VII LOBBYIST	CEF	RTIFICATION			
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE JAN - 9 2019 DATE		By: ST/		RIZED TO ADMINISTER OATHS	

Rev. 11/2018

Doc. Date: <u>Undarkd</u> Stacey Pak Doc. Description <u>L</u> In Port	1# Pages: 2 First Circuit	MINIMUM STATE
Stap	01/09/2019	THE SOLD WILLIAM
Notary Signature	Date	White the state of

NOTARY CERTIFICATION



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/

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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYI	ST	NO LITERARDE TO A DITURDED VITARA
NAME (Last) (First) (M	iddle)	Simple of the second of
Clay, Murray, Richard		
LOBBYIST FIRM/EMP	LOYER (if applicable)	TELEPHONE
Ulupono Initiative		(808) 544-8975
	No. and Street or P.O Box)	FAX
999 Bishop Street, Suite 1202		EMAIL mclay@ulupono.com
(City) Honolulu	(State) HI	(Zip Code) 96813

PART II ORGANIZATIO	N	TWO OF THE PARTY	m sideous
NAME OF ORGANIZATION YOU	J LOBBY FOR (Do not abbreviate)	TELEPHONE	
Ulupono Initiative		(808) 544-8960	
MAILING ADDRESS (No. and Street or P.O. Box)		FAX	
999 Bishop Street, Suite 1202		SHEMED STREET GRASS SHARE	as, Hw
100011		EMAIL info@ulupono.com	
(City) Honolulu	(State) HI	(Zip Code) 96813	2 100

PART III EXPENDITURES, BY TYPE					
Political Contributions	Amount 0 1/1/19	Receptions, Meals, Food & Beverages	Amount 3P 2/1/19		
Preparation & Distribution of Lobbying Materials	Amount y 2/1/14	Media Advertising	Amount 0 2/1/19		
Entertainment & Events	Amount yf 2/1/17	Other			
an Bein		TOTAL OF 2/1	/in Nota		

PART IV FEES, COI YOU RECEIVED FO					EMBERSHIP FEES
Fees			Amount		
Compensation		Amount			
Contributions		TOOPER	Amount	A. H. J.	
Membership Fees	A.11 6		Amount	7	
☐ Check here if additiona	l sheets	attached	☑ n/a	Ty	
PART V DESCRIPT	ION C	F SUBJECTS (ON WHICH	YOU LOE	BBIED
■Business & Economic Development		□Community Service	ces	□Customer	Services
□Culture & Arts		⊠Housing		☑Public Wo Sustainability	rks, Infrastructure &
□Parks & Recreation		□Public Health, Saf	fety & Welfare	□Tourism	ne W. 21 ten 1. Swift R
⊠Transportation	(a)	⊠Zoning & Planning	9	□Specific Legislation: □ Additional Sheet(s) Attached Bill No(Year) Reso No Admin. Rule No Dept	
□Other (indicate below):		PERSONAL PROPERTY NA	10 m 10 0 1 5 m	1200	PART II ORGANIZA
PART VI POLICY M					GHT TO
1. Bill 15 (2013) SF 2/1/17	Outcor Passed		4.		Outcome:
2. Bill 25 (2018) St 2/1/19	Outcor Failed	ne:	5.		Outcome:
3.	Outcor	me:	☐ Additional	Additional Sheet(s) Attached	
PART VII LOBBYIS	TCE	PTIEICATION	Agvr	VI MI	MINERAL TO THE
I hereby certify that the foregoing statements are true and correct. Doc. Date: JAN 25 2019 # Page LOBBYIST SIGNATURE Notary Name: Mirriam R. Domingo D. Los		My commission	OFFICIAL AUTHOR OFFICI	ZED TO ADMINISTER OATHS NOTARY PUBLIC DICIAL CIRCUIT NO. 18-137	
Rev. 11/2018	tary Signa	NOTE Thorse	10th of Each Y		S 3/25/2022, OF HAWAITE



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov

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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIS	Tisou do y - May			
NAME (Last) (First) (Mic	ldle)		the South # 2 & & a 1 1 2 2 2	
Cooke, Jesse, K.				
LOBBYIST FIRM/EMPL	OYER (if applicable)		TELEPHONE	
Ulupono Initiative			(808) 544-8978	
MAILING ADDRESS (No. and Street or P.O Box)			FAX	
999 Bishop Street, Suite 12	02			
The Parallel of the first			EMAIL jcooke@ulupono.com	
(City) Honolulu	(State)	pulgitie	(Zip Code) 96813	
DART II ORGANI	ZATION			

PART II ORGANIZATION		valled almost a set to
NAME OF ORGANIZATION YOU L	TELEPHONE	
Ulupono Initiative	(808) 544-8960	
MAILING ADDRESS (No. and Street	FAX	
999 Bishop Street, Suite 1202		전 기계나이어나면 어떤 그리아들다던데한
97.001110		EMAIL info@ulupono.com
(City) Honolulu	(State) HI	(Zip Code) 96813

	SOURCE WINDOWS MANY				
PART III EXPENDITURES, BY TYPE					
Political Contributions	Amount 10 2/1/19	Receptions, Meals, Food & Beverages	Amount Jr 2/1/19		
Preparation & Distribution of Lobbying Materials	Amount OF 2/1/19	Media Advertising	Amount		
Entertainment & Events	Amount Je Z///19	Other	s) Attached		
and the risks and	nga naga - wanga sa	TOTAL OF ZIIIA	LOBOVAL SIGNATORO		
		he: Miniam R: Domingo First Circuit	Notary Nar		

Deadline: January 10th of Each Year NOTE: This is a public document

Rev. 11/2018

PART IV FEES, CO YOU RECEIVED FO					IEMBERSHIP FEES
Fees		q	Amount	The said the said that	
Compensation		Amount			
Contributions	0.00	raesas	Amount	A REUC	
Membership Fees		negati Security	Amount	UE)	
☐ Check here if additiona	l sheets	attached	Z/1/14 √P ⊠ n/a	l j	
PART V DESCRIPT	ION C	F SUBJECTS	ON WHICH	YOU LOI	BBIED
		□Community Service	ces	□Customer	Services
□Culture & Arts	- 15 00 C-	⊠Housing		☑Public Wo	orks, Infrastructure &
□Parks & Recreation		□Public Health, Sat	fety & Welfare	□Tourism	and the second s
		J 193		☐ Specific Legislation: ☐ Additional Sheet(s) Attached	
⊠Transportation		☑Zoning & Planning		Bill No(Year) Reso No Admin. Rule No Dept	
Other (indicate below):		REST GALL	belon of a 20%	MOJB 1980AVKY	PARE II OPCIANIZATION
PART VI POLICY M INFLUENCE AND C	AKIN	G PROCESS D	ECISIONS	YOU SOL	JGHT TO
1, constant	Outcor	me:	4.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Outcome:
2.	Outcor	me:	5.	4	Outcome:
3.	Outcor	me:	☐ Additional Sheet(s) Attached		ached
PART VII LOBBYIS	T CEF	RTIFICATION	50.7	2 200	William State of the State
LOBBYIST SIGNATUREDate: And 3 0 2019 # Pages			My commissio	OFFICIAL AUTHOR	ZED TO ADMINISTER ON THE
Notary Signature	gnature	NOTE: This is a	public documer	nt	THE OF HE WAS



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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle) Coppa, Bruce		
LOBBYIST FIRM/EMPLOYER	(if applicable)	TELEPHONE
Capitol Consultants of Hawa	iii, LLP	(808) 531-4551
MAILING ADDRESS (No. and	Street or P.O Box)	FAX (808) 533-4601
222 South Vineyard Street, Suite 401		EMAIL bruce.coppa@808cch.com
(City) Honolulu	(State) HI	(Zip Code) 96813

PART II ORGANIZATION				
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) Airbnb, Inc.		TELEPHONE (415) 389-6800		
MAILING ADDRESS (No. and Street or P.O. Box) c/o Joel Aurora, Designated agent for Filer 2350 Kerner Blvd., Ste. 250		FAX (415) 388-6874		
		EMAIL airbnbinc@nmgovlaw.com		
(City) San Rafael (State) CA		(Zip Code) 94901		

Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount
Entertainment & Events	Amount	Other	

PART IV FEES, CO YOU RECEIVED F	OR TH	ISATION, CON E PURPOSE O	TRIBUTION F LOBBYII	NS AND M	IEMBERSHIP FEES
Fees			Amount		
Compensation		Amount \$12,565.44			
Contributions		Amount			
Membership Fees		Amount			
☐ Check here if additional sheets attached		🗷 n/a			
PART V DESCRIP	ΓΙΟΝ Ο	F SUBJECTS	ON WHICH	YOU LO	BBIED
☐Business & Economic Development		□Community Servi		□Customer	
□Culture & Arts		□Housing		□Public Wo Sustainabilit	rks, Infrastructure &
□Parks & Recreation		□Public Health, Sa	fety & Welfare	□Tourism	
□Transportation	sportation Zoning & Planning		9	□Specific Legislation: □ Additional Sheet(s) Attached Bill No(Year) Reso No Admin. Rule No Dept	
☑Other (indicate below):	lesos 17-	52, 17-163, 17-164, 1	7-301	I	
PART VI POLICY N					IGHT TO
1.	Outco		4.		Outcome:
2.	Outco	me:	5.		Outcome:
3.	Outco	me:	☐ Additional	al Sheet(s) Attached	
PART VII LOBBYIS	ST CEF	RTIFICATION			
I hereby certify that the fore and correct. LOBBYIST SIGNATURE DATE			Subscribed and This 10th day: MOTARY OR ANY OR MY OR ANY	BRENDA DEFICIAL AUTHORI	.,,,,,,,
Rev. 11/2018		Deadline: January	10 th of Each Y		Date: 1/1/9 # Pages 2 Name: Brendan Frodente First Circ

NOTE: This is a public document



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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIS	ST .	
NAME (Last) (First) (Mic Coppa, Bruce	ldle)	
LOBBYIST FIRM/EMPL	OYER (if applicable)	TELEPHONE
Capitol Consultants of	Hawaii, LLP	(808) 531-4551
MAILING ADDRESS (No. and Street or P.O Box)		FAX (808) 533-4601
222 South Vineyard Street, Suite 401		EMAIL bruce.coppa@808cch.com
(City) Honolulu	(State) HI	(Zip Code) 96813

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LO American Chemistry Council	TELEPHONE (916) 448-2581	
MAILING ADDRESS (No. and Street or P.O. Box)		FAX (916) 442-2449
1121 L Street, Suite 609		EMAIL Tim_Shestek@americanchemistry.
(City) Sacramento (State) CA		(Zip Code) 95814

PART III EXPENDI	TURES, BY TYPE		
Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount
Entertainment & Events	Amount	Other Additional Sheet(s) Attached
		TOTAL -NA-	

YOU RECEIVED					MEMBERSHIP FEES
Fees		Amount			
Compensation		Amount \$4	1,250		
Contributions		Amount			
Membership Fees			Amount		
☐ Check here if addition	nal sheets	s attached	□ n/a		
PART V DESCRIF	PTION	F SUBJECTS	ON WHICH	YOU LO	BBIED
☐Business & Economic Development		□Community Servi		□Customer	
□Culture & Arts		□Housing		☑Public Wo	orks, Infrastructure &
□Parks & Recreation		□Public Health, Sa	fety & Welfare	□Tourism	
				□Specific L	egislation: onal Sheet(s) Attached
□Transportation □Zoning & Planning		9	Bill No(Year) Reso No Admin. Rule No Dept		
☑Other (indicate below):		Z3 17-108 18-92			
PART VI POLICY INFLUENCE AND	OUTC	OME (e.g., Bill)			
¹ ·Bill 17-71	Outcor Deferre	ne: ed	⁴ ·Bill 18-92		Outcome: Introduced
² ·Bill 17-73	Outcor	ne: ed	5.		Outcome:
^{3.} Bill 17-108	Outcor Deferre	ne: ed	☐ Additional Sheet(s) Attached		
PART VII LOBBYI	ST CEF	RTIFICATION			
I hereby certify that the for and correct. LOBBYIST SIGNATURE DATE			Subscribed and This O da By: STOTARY OR ANY COMMISSION OF THE PROPERTY OF THE	BF OPFICIAL AUTHORI	2019 RENDAN FRODENTE
lev. 11/2018		Deadline: January NOTE: This is a		Notary N Doc. De	ste: /// # Páges 2. Name: Bréndan Frodente First Circlescription 20/8 Annucl
				Notary S	ignature Da



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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST			
NAME (Last) (First) (Middle) Coppa, Bruce			
LOBBYIST FIRM/EMPLOYER (if applicable) TELEPHONE			
Capitol Consultants of Hawaii, LLP	(808) 531-4551		
MAILING ADDRESS (No. and Street or P.O Box)	FAX (808) 533-4601		
222 South Vineyard Street, Suite 401	EMAIL bruce.coppa@808cch.com		
(City) Honolulu (State) HI	(Zip Code) 96813		

PART II ORGANIZATION				
NAME OF ORGANIZATION YOU Hawaiian Memorial Life Plan Ltd	TELEPHONE (808) 522-5233			
MAILING ADDRESS (No. and Stre	FAX (808) 522-9310			
1330 Maunakea Street		EMAIL jay.morford@dignitymemorial.com		
(City) Honolulu	(State) HI	(Zip Code) 96813		

PART III EXPENDIT	TURES, BY TYPE	,	
Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount
Entertainment & Events	Amount	Other Additional Sheet	(s) Attached
		TOTAL -NA-	

	OMPENSATION, CON OR THE PURPOSE O			IEMBERSHIP FEES	
Fees		Amount			
Compensation		Amount \$5,759.16			
Contributions		Amount	,		
Membership Fees		Amount			
☐ Check here if additional sheets attached		□ n/a			
PART V DESCRIP	TION OF SUBJECTS	ON WHICH	YOU LOI	BBIED	
☐Business & Economic Development	□Community Servi	ces	□Customer	Services	
□Culture & Arts	□Housing		□Public Wo	orks, Infrastructure &	
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism	•	
			☑Specific Legislation: ☐ Additional Sheet(s) Attached		
□Transportation	■Zoning & Planning	☑Zoning & Planning		Bill No. See Below (Year) Reso No Admin. Rule No Dept	
	MAKING PROCESS D OUTCOME (e.g., Bill)			JGHT TO	
1. Bill 17-1	Outcome: Deferred	4.		Outcome:	
2.	Outcome:	5.		Outcome:	
3.	Outcome:	☐ Additional	Additional Sheet(s) Attached		
PART VII LOBBYIS	ST CERTIFICATION				
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE NOTARY PUBLIC PUBLIC		Subscribed and sworn to before me This		NDAN FRODEN POTARY IZED TO ADMINISTER OATHSLIC	
DATE/	My commission 7/25/2	on expires:	No. 17-313		
Deadline: January 10 th of Each Year NOTE: This is a public document NOTE: This is a public document Doc. Date: 1/1/9 # Pages 7_Notary Name: Brendan Frodente First Circuit Doc. Description 2018 Annual Notary Signature Date					



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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST			
NAME (Last) (First) (Middle) Coppa, Bruce			
LOBBYIST FIRM/EMPLOYER (if applicable	TELEPHONE		
Capitol Consultants of Hawaii, LLP	(808) 531-4551		
MAILING ADDRESS (No. and Street or P.O Box)		FAX (808) 533-4601	
222 South Vineyard Street, Suite 401	EMAIL bruce.coppa@808cch.com		
(City) Honolulu (State) HI		(Zip Code) 96813	

PART II ORGANIZATION				
NAME OF ORGANIZATION YOU LOB Kamehameha Schools	TELEPHONE (808) 523-6348			
MAILING ADDRESS (No. and Street or P.O. Box)		FAX (916) 442-2449		
567 S. King Street, Suite 400		EMAIL kaburges@ksbe.edu		
(City) Honolulu	(State) HI	(Zip Code) 96813		

Political Contributions			
	Amount	Receptions, Meals, Food & Beverages	Amount
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount
Entertainment & Events	Amount	Other Additional Sheet(s) Attached	
Entertainment & Events	Amount	Other	s) At

PART IV FEES, CO YOU RECEIVED FO					MEMBERSHIP FEES
Fees		Amount			
Compensation		Amount \$3,821.75			
Contributions			Amount		
Membership Fees			Amount		
☐ Check here if addition	al sheets	s attached	□ n/a		
PART V DESCRIP	TION C	F SUBJECTS	ON WHICH	YOU LO	BBIED
☐Business & Economic Development		□Community Servi		□Customer	
□Culture & Arts		□Housing		□Public Wo	orks, Infrastructure &
□Parks & Recreation		□Public Health, Sa	fety & Welfare	□Tourism	
□Transportation		⊠ Zoning & Planning		☑Specific Legislation: ☐ Additional Sheet(s) Attached Bill No. See Below (Year) Reso No. Admin. Rule No. Dept.	
		17 108 18 9			
PART VI POLICY NINFLUENCE AND					JGHT TO
¹ .Bill 17-58		ne: I Second Reading	4.	added)	Outcome:
² ·Bill 17-59		ne: d Second Reading	5.		Outcome:
3.	Outcor		☐ Additional	Sheet(s) Att	ached
PART VII LOBBYIS	T CEF	RTIFICATION			
I hereby certify that the foregoing statements are true and correct. NOTARY PUBLIC NO. 17-313		Subscribed and sworn to before me This		AN FRODENTE NOTABY	
DATE		OF HAWAIL	My commissio	n expires:	No. 17-313
Rev 11/2018		Deadline: January NOTE: This is a		Notary Na	e: 1/1/19 #Pages 22 ame: Blendan Frodente First Circuit scription 2018 Annual

tary Signature

1/10/19 Date



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov

Website: http://www.honolulu.gov/ethics/

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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 - December 31, 2018) (Type or Print Clearly)

PART I LOBBYIS	Γ	
NAME (Last) (First) (Midd	ile)	
Cordero, George		
LOBBYIST FIRM/EMPLC	YER (if applicable)	TELEPHONE
American Civil Liberties Unio	n of Hawaii Foundation	808 380 5423
MAILING ADDRESS (No. and Street or P.O Box) P.O. Box 3410		FAX 808 522 5909
		EMAIL gcordero@acluhawaii.org
(City) Honolulu	(State) Hawaii	(Zip Code) 96801

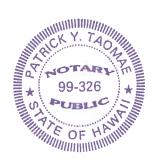
PART II ORGANIZATION					
NAME OF ORGANIZATION	YOU LOBBY FOR (Do not abbreviate)	TELEPHONE			
American Civil Liberties Union of	Hawaii Foundation	808 522 5900			
MAILING ADDRESS (No. and P.O. Box 3410	d Street or P.O. Box)	FAX 808 522 5909			
F.O. BOX 3410		EMAIL office@acluhawaii.org			
(City) Honolulu	(State) Hawaii	(Zip Code) 96801			

PART III EXPENDIT	TURES, I	BY TYPE		
Political Contributions	Amount	\$ 0	Receptions, Meals, Food & Beverages	Amount \$ 0
Preparation & Distribution of Lobbying Materials	Amount	\$ 6.04	Media Advertising	Amount \$ 0
Entertainment & Events	Amount	\$ 0	Other □Additional Sheet(s) Attached
	,		TOTAL \$ 0	

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING						
Fees		Amount \$ 0				
Compensation			Amount \$	Amount \$ 3 8 4		
Contributions	TgF*			0		
Membership Fees			Amount \$ 0			
☐ Check here if additiona	l sheets	attached	□ n/a			
PART V DESCRIPT	ION C	F SUBJECTS	ON WHICH	YOU LOI	BBIED	
☐Business & Economic Development		□Community Service		□Customer		
□Culture & Arts		□Housing		☑Public Wo Sustainabilit	rks, Infrastructure & y	
□Parks & Recreation		□Public Health, Sa	fety & Welfare	□Tourism		
□Transportation □Zoning & Pla		□Zoning & Planninថ	3	□Specific Legislation: □ Additional Sheet(s) Attached Bill No(Year) Reso No Admin. Rule No Dept		
□Other (indicate below):						
PART VI POLICY M					IGHT TO	
1. Bill 51 (2018)	Outcon Passed		4.		Outcome:	
² . Bill 52 (2018)	Outcor Passed		5.		Outcome:	
3.	Outcor		☐ Additional	☐ Additional Sheet(s) Attached		
PART VII LOBBYIS	T CER	RTIFICATION				
I hereby certify that the foregoing statements are true and correct.		Subscribed and sworn to before me This day of By: * See attached notary page.		notary page.		
DATE I GNATURE			My commission expires:			

STATE OF HAWAII)
) SS.
CITY AND COUNTY OF HONOLULU)

The foregoing undated Honolulu Ethics Commission 2018 Lobbyist Annual Report consisting of two (2) pages was subscribed, sworn to, and acknowledged before me by GEORGE CORDERO in the First Circuit of the State of Hawaii on this <u>9th</u> day of <u>January</u>, 2019.



Patrick y. Farmas

PATRICK Y. TAOMAE Notary Public, State of Hawaii

My Commission Expires: 6/30/2019



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov

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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 - December 31, 2018) (Type or Print Clearly)

PART I LOBBYIS	STERO LUOY HOMEN AC	PART FEESCHUNG OF SUBJECTS
NAME (Last) (First) (Mi	ddle)	Const. C. J. Benedit Lander
Datta, Eric, Kyle		
LOBBYIST FIRM/EMPL	OYER (if applicable)	TELEPHONE
Ulupono Initiative		(808) 544-8960
MAILING ADDRESS (N	lo. and Street or P.O Box)	FAX
999 Bishop Street, Suite 1:	202	
he name was a life of		EMAIL kdatta@ulupono.com
(City) Honolulu	(State)	(Zip Code) 96813
	Le de la constantina	

PART II ORGANIZATION		a Mid state W. entitled
NAME OF ORGANIZATION YOU LO	TELEPHONE	
Ulupono Initiative	(808) 544-8960	
MAILING ADDRESS (No. and Stree	FAX	
999 Bishop Street, Suite 1202		E SMOUTHLING TOWN THE
Edyan-D		EMAIL info@ulupono.com
(City) Honolulu	(State) HI	(Zip Code) 96813

PART III EXPENDITURES, BY TYPE					
Political Contributions	Amount \$0	Receptions, Meals, Food & Beverages	Amount _{\$0}		
Preparation & Distribution of Lobbying Materials	Amount \$0	Media Advertising	Amount \$0		
Entertainment & Events	Amount \$0,	Other			
A Said Management		TOTAL \$0	e Beuthneig in middin		

V12.14.20

	MPENSATION, CON OR THE PURPOSE O			IEMBERSHIP FEES	
Fees		Amount \$0			
Compensation		Amount \$0	Amount \$0		
Contributions	ar er venege	Amount \$0	an uras		
Membership Fees	_	Amount \$0	Dir.		
☐ Check here if additiona	Il sheets attached	□ n/a			
PART V DESCRIPT	ION OF SUBJECTS	ON WHICH	YOU LO	BBIED	
☐Business & Economic Development	□Community Servi	ces	□Customer	Services	
□Culture & Arts	□Housing		□Public Wo	orks, Infrastructure &	
□Parks & Recreation	□Public Health, Sa	fety & Welfare	□Tourism	as succession and take	
	- 12 APR-2			☐ Specific Legislation: ☐ Additional Sheet(s) Attached	
□Transportation	□Zoning & Planning	□Zoning & Planning		Bill No(Year) Reso No Admin. Rule No Dept	
□Other (indicate below):	Skok Bist Teased	eric so er	HOLES	TACATALIDOAD A TACAT	
	IAKING PROCESS D DUTCOME (e.g., Bill)			JGHT TO	
1.	Outcome:	4.	usseu _j	Outcome:	
2.	Outcome:	5.	3)	Outcome:	
3.	Outcome:	☐ Additional	al Sheet(s) Attached		
PART VII LOBBYIS	T CEDTIFICATION.	HEAL			
I hereby certify that the fore and correct.	5 5 6 6	By: NOTARY OR ANY My commission	of JAN 1	5 2019	
	NOTE: This is a			ATE OF HANKING	



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/

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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly) 19 JAN -4 A11:06

PART I LOBBYIST		
NAME (Last) (First) (Middle)		
Delaunay, Christopher M.		
LOBBYIST FIRM/EMPLOYER	(if applicable)	TELEPHONE
Pacific Resource Partnership st 1/24 808-528-5557		
MAILING ADDRESS (No. and Street or P.O Box)		FAX 808-528-0421
1100 Alakea Street, 4th Floor		
		EMAIL cdelaunay@prp-hawaii.com
(City) Honolulu	(State) HI	(Zip Code) 96813

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBE	BY FOR (Do not abbreviate)	TELEPHONE
Pacific Resource Partnership		808-528-5557
MAILING ADDRESS (No. and Street or P.O. Box)		FAX 808-528-0421
1100 Alakea Street, 4th Floor		000-020-0421
		EMAIL
(City) Honolulu (State)		(Zip Code) 96813

PART III EXPENDITURES, BY TYPE					
Political Contributions	Amount	Receptions, Meals, Food & Beverages	i Amount		
Preparation & Distribution of Lobbying Materials	Amount \$100.29	Media Advertising	Amount		
Entertainment & Events	Amount	Other □Additional Shee	et(s) Attached		
		TOTAL \$100.29			

*					
PART IV FEES, C YOU RECEIVED F		•			EMBERSHIP FEES
Fees		Amount			
Compensation			Amount		
Contributions			Amount		
Membership Fees			Amount		
☐ Check here if additio	nal sheets	attached	⊠ n/a		
PART V DESCRIP	TION C	F SUBJECTS	ON WHICH	YOU LOE	3BIED
□Business & Economic Development		□Community Service		□Customer	
□Culture & Arts		⊠Housing		⊠Public Wo Sustainability	rks, Infrastructure & y
□Parks & Recreation		□Public Health, Sat	fety & Welfare	□Tourism	
□Transportation	⊠Zoning & Planning		g	□Specific Legislation: □ Additional Sheet(s) Attached Bill No(Year) Reso No Admin. Rule No Dept	
□Other (indicate below):		1			
PART VI POLICY INFLUENCE AND					GHT TO
1. Reso 18-221		ne:	^{4.} Reso 17-333	·	Outcome: Adopted
2. Reso 18-236	Outcor Adopted	ne:	5.		Outcome:
^{3.} Bill 59 (2017)	Outcor Passed		☐ Additional	☐ Additional Sheet(s) Attached	
DADT VII I ORRVI		PTIEICATION			
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE 12/20/18 DATE					

Hawaii All-Purpose Acknowledgment

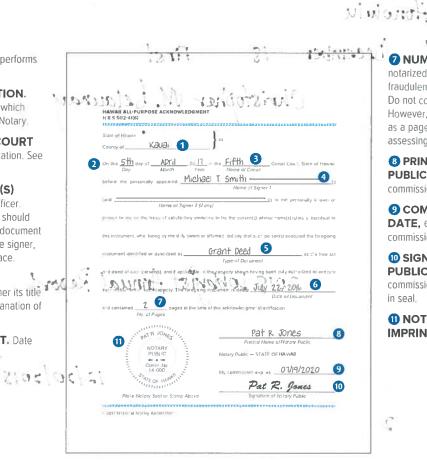
The Hawaii All-Purpose Acknowledgment certificate may be used when an individual is signing and acknowledging either on his or her own behalf, or in a representative capacity.

"Every acknowledgment or jurat shall be evidenced by a certificate signed and dated by a notary public. The certificate shall include the printed name of the notary public, the official stamp or seal of the

notary public, identification of the jurisdiction in which the notarial act is performed, identification or description of the document being notarized, which shall be close in proximity to the acknowledgment or jurat, and the number of pages and date of such document." The NNA has incorporated these elements into the body of the certificate.

Instructions:

- **1 COUNTY** where Notary performs notarization.
- 2 DATE OF NOTARIZATION. Actual month, day and year in which signer(s) appear(s) before the Notary.
- 3 NAME OF CIRCUIT COURT where Notary performs notarization. See list of Circuits below.
- NAME(S) OF SIGNER(S) appearing before notarizing officer. Initials and spelling of name(s) should agree with name(s) signed on document and ID card. If there is only one signer, line through any remaining space.
- **5 DESCRIPTION OF DOCUMENT** notarized, either its title (e.g., "Grant Deed") or an explanation of its purpose.
- **6 DATE OF DOCUMENT.** Date that appears on the document.



- **NUMBER OF PAGES** in the notarized document. This may point out fraudulent addition or removal of pages. Do not count the certificate as a page. However, the certificate will be regarded as a page by recording officials in assessing recording fees.
- **8 PRINTED NAME OF NOTARY PUBLIC** exactly as it appears on commission certificate.
- **9 COMMISSION EXPIRATION DATE,** exactly as it appears on commission certificate.
- (I) SIGNATURE OF NOTARY PUBLIC exactly as name appears on commission certificate, in space 8 and in seal.
- 11 NOTARY SEAL OR STAMP IMPRINT clearly and legibly affixed.

HAWAII CIRCUIT COURTS

First Circuit: Island of Oahu and other islands of state not in any other circuit.

Second Circuit: Islands of Maui, Molokai, Lanai, Kahoolawe, Molokini.

Third Circuit: Island of Hawaii.

Fourth Circuit: None.

Fifth Circuit: Islands of Kauai, Niihau.



9350 De Soto Ave., Chatsworth, CA 91311-4926 | 1-800-876-6827 | National Notary.org

HAWAII ALL-PURPOSE ACKNOWLEDGMENT H.R.S 502-41(6)

	######################################
State of Hawaii	SS.
County of Honolulu	33.
On this day of becember_, 20_18, in the second before me personally appeared Christoph	Name of Signer 1 Circuit Court, State of Hawaii, Name of Signer 1 Circuit Court, State of Hawaii, Name of Signer 1
(and	(,) to me personally known or
	o be the person(s) whose name(s) is/are subscribed to
this instrument, who, being by me duly sworn or affirm	ned, did say that such person(s) executed the foregoing
instrument identified or described as 2018 Lob	Type of Document as the free act
and deed of such person(s), and if applicable, in the o	capacity shown having been duly authorized to execute
such instrument in such capacity. The foregoing instr	ument is dated 12/20/2018
and contained pages at the time of the No. of Pages	Date of Document
aniller,	Daphne Kealoha
THE KEAKO	Printed Name of Notary Public
NOTARY PUBLIC	Notary Public — STATE OF HAWAII
NOTARY PUBLIC * No. 17-168	My commission expires: Twell, 2021
ATE OF HAMPING	My commission expires: June 11, 2021 Naphue Kealoha
Place Notary Seal or Stamp Above	Signature of Notary Public



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov
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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 - December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Midd	e)	
DEWEESE, Garen R.		
LOBBYIST FIRM/EMPLO	YER (if applicable)	TELEPHONE
Hawaiian Electric Company, Inc.		808-543-5806
MAILING ADDRESS (No. and Street or P.O Box)		FAX 808-203-1634
P.O. Box 2750		
		EMAIL garen.deweese@hawaiianelectric.com
(City) Honolulu	(State) HI	(Zip Code) 96840
(City) Honolulu	(State) HI	garen.deweese@hawaiianelectric. (Zip Code)

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBE	BY FOR (Do not abbreviate)	TELEPHONE
Hawaiian Electric Company, Inc.		808-543-5806
MAILING ADDRESS (No. and Street or	P.O. Box)	FAX
P.O. Box 2750		
		EMAIL garen.deweese@hawaiianelectric.com
(City) Honolulu	(State) HI	(Zip Code) 96840

PART III EXPENDIT	TURES, BY TYPE		
Political Contributions	Amount 0	Receptions, Meals, Food & Beverages	Amount 0
Preparation & Distribution of Lobbying Materials	Amount 0	Media Advertising	Amount 0
Entertainment & Events	Amount 0	Other Additional Sheet(s) Attached	
		TOTAL 0	

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND YOU RECEIVED FOR THE PURPOSE OF LOBBYING					EMBERSHIP FEES
Fees		Amount			
Compensation			Amount		
Contributions			Amount		
Membership Fees			Amount	200	
☐ Check here if additiona	l sheets	attached	⊠ n/a	with the same of t	
PART V DESCRIPT	ION C	F SUBJECTS	ON WHICH	YOU LO	BBIED
☐Business & Economic Development		□Community Service	ces	□Customer	Services
□Culture & Arts		□Housing		□Public Wo Sustainabilit	rks, Infrastructure &
□Parks & Recreation		□Public Health, Sat	fety & Welfare	□Tourism	
□Transportation □Zoning & PI		□Zoning & Planning	□ Specific Legislation: □ Additional Sheet(s) Attach Bill No(Year) Reso No Admin. Rule No Dept		nal Sheet(s) Attached(Year) No
□Other (indicate below):					
PART VI POLICY M					GHT TO
1. None in 2018	1. None in 2018 Outcome:		4.		Outcome:
2.	Outcor	ne:	5.		Outcome:
3.	Outcor	me:	☐ Additional Sheet(s) Attached		iched
PART VII LOBBYIS	T CEF	RTIFICATION			
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE December 19, 2018 DATE		Subscribed and sworn to before me This 19th day of December, 2018 By: NOTARY OF ANY OFFICIAL AUTHORIZED TO ANNIETH FORTH My commission expires: July 18, 2020			
Rev. 11/2018 Deadline: Janua NOTE: This is a					OF HAMMIN

NOTE: This is a public document

NOTARY CERTIFICATE ON NEXT PAGE

Doc. Date: <u>UNdated</u> # Pages: 2

Name: <u>Deborah Ichishita</u> First Circuit

Doc. Description: 2018

Lobbyist Annual Report

Lubral Signature

NOTARY CERTIFICATION

CHISTIAN

OTAR

OT





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TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov

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Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)	•	
Egged, Rick		
LOBBYIST FIRM/EMPLOYER Waikiki Improvement Association	(if applicable)	TELEPHONE (808) 923-1094
MAILING ADDRESS (No. and Street or P.O Box) 2250 Kalakaua Ave. Suite 315		FAX (808) 923-2622
		rick@waikikiimprovement.com
(City) Honolulu	(State) Hawaii	(Zip Code) 96815

PART II ORGANIZATION				
NAME OF ORGANIZATION YOU LOBE	3Y FOR (Do not abbreviate)	TELEPHONE		
Waikiki Improvement Association		(808) 923-1094		
MAILING ADDRESS (No. and Street or P.O. Box) 2250 Kalakaua Ave. Suite 315		FAX (808) 923-2622		
		EMAIL rick@waikikiimprovement.com		
(City) Honolulu	(State) Hawaii	(Zip Code) 96815		

PART III EXPENDITURES, BY TYPE				
Political Contributions	Amount 0	Receptions, Meals, Food & Beverages	Amount 0	
Preparation & Distribution of Lobbying Materials	Amount 0	Media Advertising	Amount 0	
Entertainment & Events	Amount 0	Other Additional Sheet(s) Attached	
		TOTAL 0		

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING						
Fees			Amount			
Compensation		Amount \$1,985				
Contributions		Amount				
Membership Fees	Membership Fees			Amount		
☐ Check here if addition	al sheets	attached	□ n/a			
PART V DESCRIP	ΓΙΟΝ Ο	F SUBJECTS	ON WHICH	YOU LOI	BBIED	
☑Business & Economic Development		⊠ Community Servi	ces	⊠ Customer	Services	
I Culture & Arts		□Housing		☑Public Wo Sustainabilit	orks, Infrastructure & Y	
■Parks & Recreation		⊠ Public Health, Sa	fety & Welfare	▼Tourism		
☑Transportation ☑Zoning & Planning ☐Other (indicate below):		□ Specific Legislation: □ Additional Sheet(s) Attached Bill No(Year) Reso No Admin. Rule No Dept		nal Sheet(s) Attached (Year) No.		
PART VI POLICY N					IGHT TO	
¹ .Bill 51 (2019)	Outcor Passed	ne:	⁴ ·Bill 6 (2018)		Outcome: Passed	
2. _{Bill} 52 (2019)	Outcor Passed	ne:	⁵ .Bill 11 (2018)		Outcome: Passed	
3. Resolution ≴ 18-236	Outcor Passed	ne:	☐ Additional Sheet(s) Attached			
PART VII LOBBYIS	T CEF	RTIFICATION				
I hereby certify that the foregoing statements are true and correct. No. 08-573 LOBBYIST SIGNATURE 3/26/19 DATE			Subscribed and This	y of <u>HARC</u>	ZED TO ADMINISTER DATHS. NOTARY	
Rev. 11/2018		Deadline: January	/ 10 th of Each Y	ear	No. 08-573	



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST						
NAME (Last) (First) (Middle)	NAME (Last) (First) (Middle)					
Ellamar, Stacy E.O.						
LOBBYIST FIRM/EMPLOYER Pacific Resource Partnership	LOBBYIST FIRM/EMPLOYER (if applicable) Pacific Resource Partnership TELEPHONE 808-528-5557					
MAILING ADDRESS (No. and Street or P.O Box) 1100 Alakea Street, 4th Floor FAX						
EMAIL stacyellamar@gmail.com						
(City) Honolulu (State) Hawaii (Zip Code) 96813						

PART II ORGANIZATION						
NAME OF ORGANIZATION	YOU LOBBY FOR (Do not abbreviate)	TELEPHONE				
Pacific Resource Partnership		808-528-5557				
MAILING ADDRESS (No. an 1100 Alakea Street, 4th Floor	d Street or P.O. Box)	FAX				
		EMAIL				
(City) Honolulu	(State) Hawaii	(Zip Code) 96813				

PART III EXPENDIT	URES, BY TYPE		
Political Contributions	Amount 0	Receptions, Meals, Food & Beverages	Amount 0
Preparation & Distribution of Lobbying Materials	Amount 58.88	Media Advertising	Amount 0
Entertainment & Events	Amount 0	Other Additional Sheet((s) Attached
		TOTAL 58.88	,

Fees			Amount		
Compensation			Amount		
Contributions			Amount		
Membership Fees					
☐ Check here if additional sheets attached		🗷 n/a			
PART V DESCRIF	PTION C	F SUBJECTS	ON WHICH	YOU LOI	BBIED
☐Business & Economic Development		□Community Servi	ces	□Customer	Services
□Culture & Arts		23 Housing		□Public Wo	orks, Infrastructure &
□Parks & Recreation		□Public Health, Sa	fety & Welfare	□Tourism	
□Transportation		□Zoning & Planning		☐ Specific Legislation: ☐ Additional Sheet(s) Attached Bill No. 59 (Year)2017 Reso No. 17-333	
□Other (indicate below):				Dept	No.
					IGHT TO
INFLUENCE AND	Outcor	OME (e.g., Bill			Outcome:
INFLUENCE AND 1. Bill 59 (2017)	Outcor Approve	DME (e.g., Bill) me: d by the mayor	X (2018), pa		
1. Bill 59 (2017) 2. Resolution 17-333	Outcor Approve	DME (e.g., Bill) me: d by the mayor me: on adopted	X (2018), pa	assed)	Outcome:
1. Bill 59 (2017) 2. Resolution 17-333 3.	Outcor Approve Outcor Resoluti	DME (e.g., Bill) me: d by the mayor me: on adopted me:	X (2018), pa	assed)	Outcome:
PART VII LOBBYI I hereby certify that the for	Outcor Approve Outcor Resoluti Outcor	DME (e.g., Bill) me: d by the mayor me: on adopted me: RTIFICATION	X (2018), pa 4. 5. Additional Subscribed an	Sheet(s) Atta	Outcome: Outcome: ached
1. Bill 59 (2017) 2. Resolution 17-333 3. PART VII LOBBY	Outcor Approve Outcor Resoluti Outcor	DME (e.g., Bill) me: d by the mayor me: on adopted me: RTIFICATION	Subscribed and This _ G da	Sheet(s) Attained sworn to be yof	Outcome: Outcome: ached



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		
ENDO-OMOTO, Darcy L		
LOBBYIST FIRM/EMPLOYER	(if applicable)	TELEPHONE
Hawaiian Electric Company, In		808-543-4818
MAILING ADDRESS (No. and	Street or P.O Box)	FAX 808-203-1147
P.O. Box 2750		FERALL
		EMAIL darcy.endo@hawaiianelectric.com
(City) Honolulu	(State) HI	(Zip Code) 96840

PART II ORGANIZATION		-
NAME OF ORGANIZATION YOU LOB	TELEPHONE	
Hawaiian Electric Company, Inc.	808-543-4818	
MAILING ADDRESS (No. and Street of	FAX	
P.O. Box 2750		
	EMAIL darcy.endo@hawaiianelectric.com	
(City) Honolulu	(State)	(Zip Code) 96840

PART III EXPENDITURES, BY TYPE					
Political Contributions	Amount 0	Receptions, Meals, Food & Beverages	Amount 0		
Preparation & Distribution of Lobbying Materials	Amount 0	Media Advertising	Amount 0		
Entertainment & Events	Amount o	Other □Additional Sheet(s) Attached		
		TOTAL 0			

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEE YOU RECEIVED FOR THE PURPOSE OF LOBBYING					EMBERSHIP FEES
Fees			Amount		
Compensation			Amount		
Contributions			Amount		
Membership Fees			Amount		
☐ Check here if additiona	l sheets	attached	⊠ n/a		
PART V DESCRIPT	ION C	F SUBJECTS	ON WHICH	YOU LO	BBIED
□Business & Economic Development		□Community Service	ces	□Customer	Services
□Culture & Arts		□Housing		□Public Wo Sustainabilit	rks, Infrastructure &
□Parks & Recreation		□Public Health, Saf	fety & Welfare	□Tourism	
□Transportation □Z		□Zoning & Planning		□Specific Legislation: □ Additional Sheet(s) Attached Bill No(Year) Reso No Admin. Rule No Dept	
□Other (indicate below):					
PART VI POLICY M INFLUENCE AND O					GHT TO
1. None in 2018	Outcome:		4.		Outcome:
2.	Outcor	ne:	5.	Outcome:	
3.	Outcor	ne:	☐ Additional Sheet(s) Attached		
PART VII LOBBYIS	T CFF	RTIFICATION			
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE December 19, 2018 DATE			By: Lebra NOTARY OF ANY OF	y of <u>Decem</u> DEFICIAL AUTHORI ICHISHITA	ber , 2018
Rev. 11/2018 Deadline: January NOTE: This is a				9 Reverse	

POLAO TE

Des. Date: Undated # Pages: 2

Name: Deborah Ichishita First Circuit

Doc. Description: 2018 Lobbys of

ANNUAL Report

Lubrah Adichta 12/19/18

Signature NOTARY GENTIFICATION

OF HAMILIAN

OF HAMILIAN

OF HAMILIAN

Date



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768
Email: ethics@honolulu.gov
Website: http://www.honolulu.gov/ethics/

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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		
Evensen, Stacy		
LOBBYIST FIRM/EMPLOYER	(if applicable)	TELEPHONE
BT Consulting, Inc		808-524-4155
MAILING ADDRESS (No. and	Street or P.O Box)	FAX
1000 Bishop St., Ste 808		
		EMAIL stacyevensen@gmail.com
(City) Honolulu	(State) HI	(Zip Code) 96813

PART II ORGANIZATION						
NAME OF ORGANIZATION YOU LOBE	TELEPHONE					
Hawaiian Humane Society	808-356-2200					
MAILING ADDRESS (No. and Street or	P.O. Box)	FAX				
1000 Bishop St., Ste 808						
	EMAIL					
(City) Honolulu	(State) HI	(Zip Code) 96813				

PART III EXPENDITURES, BY TYPE					
Political Contributions	Amount 0	Receptions, Meals, Food & Beverages	Amount 0		
Preparation & Distribution of Lobbying Materials	Amount 0	Media Advertising	Amount 0		
Entertainment & Events	Amount 0	Other □Additional Sheet(s	s) Attached		
		TOTAL 0			

Deadline: January 10th of Each Year NOTE: This is a public document

PART IV FEES, CO YOU RECEIVED F	OMPEN OR TH	ISATION, CON E PURPOSE O	TRIBUTION OF LOBB	ONS AN	D ME	EMBERSHIP FEES
-ees			Amount	0		
Compensation			Amount	0		
Contributions			Amount	0		
Membership Fees			Amount	0		
☐ Check here if addition	nal sheets	attached	⊠ n/a			
PART V DESCRIP	TION C	F SUBJECTS	ON WHIC	H YOU	LOB	BIED
☐Business & Economic Development		□Community Servi	ces	□Custo	omer S	Services
□Culture & Arts		□Housing		□Publi Sustain		ks, Infrastructure &
□Parks & Recreation		⊠Public Health, Sa	fety & Welfar	re □Touri	sm	
☐ Transportation ☐ Zoning & Planning ☐ Other (indicate below):			G Additional Sheet(s) Attached Bill No(Year) Reso No Admin. Rule No Dept			
PART VI POLICY I						GHT TO
1. Bill 15 (2018)	Outcor	ne:	X (2018),	passed)		Outcome:
2.	Outcor		5.			Outcome:
3.	Outcor	ne:	☐ Additional Sheet(s) Attached			
PART VII LOBBYI	ST CEF	RTIFICATION				
I hereby certify that the foregoing statements are true and correct. Character Newsen LOBBYIST SIGNATURE DEC 4 2018 DATE			This 4th	day of <u>Nea</u>	CAN In	ZOIS.
Rev. 11/2018		Deadline: Januar	v 10 th of Eac	h Year		WILLIAM OF HAVING



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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19 JAN 10 P12:29

2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST					
NAME (Last) (First) (Middle)					
EVORA, GAYLA L.					
LOBBYIST FIRM/EMPLOYER	(if applicable)	TELEPHONE			
STARN O'TOOLE MARCUS & FISHER (808) 537-6100					
MAILING ADDRESS (No. and	Street or P.O Box)	FAX (808) 537-5434			
733 BISHOP STREET, SUITE 19	900				
		EMAIL gevora@starnlaw.com			
(City) HONOLULU	(State) HAWAII	(Zip Code) 96813			

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOS	BBY FOR (Do not abbreviate)	TELEPHONE	
PARK HOTELS & RESORTS INC.	(571) 302-5757		
MAILING ADDRESS (No. and Street of	FAX		
1775 TYSONS BLVD., 7TH FLOOR			
		EMAIL	
(City) TYSONS	(State) VIRGINIA	(Zip Code) 22102	

PART III EXPENDIT	TURES, BY TYPE		
Political Contributions	Amount 0	Receptions, Meals, Food & Beverages	Amount ₀
Preparation & Distribution of Lobbying Materials	Amount 0	Media Advertising	Amount 0
Entertainment & Events	Amount 0	Other Additional Sheet(s	s) Attached
		TOTAL 0	

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING Fees Amount 267.02 Compensation Amount Contributions Amount Membership Fees Amount ☐ Check here if additional sheets attached □ n/a PART V DESCRIPTION OF SUBJECTS ON WHICH YOU LOBBIED ☐ Business & Economic □ Community Services ☐ Customer Services Development □ Public Works, Infrastructure & □Culture & Arts □Housing Sustainability □ Parks & Recreation □ Public Health, Safety & Welfare **⊠**Tourism ☑ Specific Legislation: ☐ Additional Sheet(s) Attached Bill No. 13 (Year) 2018 □Transportation Reso No. Admin. Rule No. Dept. □Other (indicate below): PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME (e.g., Bill X (2018), passed) Outcome: Outcome: ¹. BILL 13 (2018) **PASSED** 2. Outcome: 5 Outcome: 3. Outcome: ☐ Additional Sheet(s) Attached PART VII LOBBYIST CERTIFICATION I hereby certify that the foregoing statements are true Subscribed and sworn to before me and correct. 2019 LOBBYIST SIGNATURE NOTARY OR AN AL AUTHORIZED TO ADMINISTER OATHS 119/19 My commission expires:

NOTARY CERTIFICATION STATEMEN	<u>1T</u>		
Doc. Date: 1-9-19	ed at time of notarization		
Document Description: Honolulu Ethics Co	ommission - 2018 Annual	MINIMA H. S.	
Report (Gayla L. Evora)		OPRY PO	13111
No. of Pages: 3		0 0 0	
Jurisdiction: First Judicial Circuit		NO 83	MILLE
Honolulu, Hawaii		THE STATE OF THE S	
Solden	1-9-19	William William	
Signature of Notary	Date of Notarization and		
Georgia H. Sakai	Certification Statement	(Official Stamp or Seal)	
Printed Name of Notary			



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		
EVORA, GAYLA L.		
LOBBYIST FIRM/EMPLOYER	(if applicable)	TELEPHONE
STARN O'TOOLE MARCUS & FI	SHER	(808) 537-6100
MAILING ADDRESS (No. and	Street or P.O Box)	FAX (808) 537-5434
733 BISHOP STREET, SUITE 19	00	
		EMAIL gevora@starnlaw.com
(City) HONOLULU	(State) HAWAII	(Zip Code) 96813

PART II ORGANIZATION					
NAME OF ORGANIZATION YOU	LOBBY FOR (Do not abbreviate)	TELEPHONE			
TURTLE BAY RESORT, LLC		(808) 293-6000			
MAILING ADDRESS (No. and Street	eet or P.O. Box)	FAX			
57-091 KAMEHAMEHA HIGHWAY		7			
	EMAIL				
(City) KAHUKU (State) HAWAII		(Zip Code) 96731			

PART III EXPENDIT	TURES, BY TYPE		
Political Contributions	Amount 0	Receptions, Meals, Food & Beverages	Amount ₀
Preparation & Distribution of Lobbying Materials	Amount 0	Media Advertising	Amount 0
Entertainment & Events	Amount 0	Other	s) Attached
		TOTAL 0	

PART IV FEES, CO YOU RECEIVED FO					IEMBERSHIP FEES	
Fees			Amount 3,371.73			
Compensation			Amount			
Contributions			Amount			
Membership Fees			Amount			
☐ Check here if additiona	l sheets	attached	□ n/a			
PART V DESCRIPT	ION C	F SUBJECTS	ON WHICH	YOU LO	BBIED	
☑Business & Economic Development		□Community Servi		□Customer		
□Culture & Arts		□Housing		□Public Wo	orks, Infrastructure &	
□Parks & Recreation		⊠Public Health, Sa	fety & Welfare	⊠Tourism		
□Transportation		⊠Zoning & Planning	Zoning & Planning		□ Specific Legislation: □ Additional Sheet(s) Attached Bill No(Year) Reso No Admin. Rule No Dept	
□Other (indicate below):						
PART VI POLICY MINFLUENCE AND C					IGHT TO	
1.	Outcor		4.		Outcome:	
2.	Outcor	ne:	5.		Outcome:	
3.	Outcor	ne:	☐ Additional Sheet(s) Attached			
PART VII LOBBYIS	RTIFICATION					
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE I/B/19 DATE			Subscribed and sworn to before me This day of Sanvay, 2019 By: NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS My commission expires:			
-1 - 1 - 1			0		ZED TO ADMINISTER OATHS	

NOTARY CERTIFICATION STA	ATEMENT	
Doc. Date: January <u>\$\fixed{\sigma}\$</u> , 2019	☐ Undated at time of notarization	WILLIAM STATE OF THE STATE OF T
Document Description: Honolulu	Ethics Commission - 2018 Annual	dr. on *
Report Form (Gayla L. Evora)		W. OTLIB Z
No. of Pages: 3		* 0.7
Jurisdiction: First Judicial Circuit		III Sand No.
Honolulu, Hawaii		WHITE SAK THINK
Q. Wakin	1-8-19	onn ass
Signature of Notary	Date of Notarization and	
	Certification Statement	
GEORGIA H. SAKAI		(Official Stamp or Seal)
Printed Name of Notary		<u>-</u>



PART I LOBBYIST

HONOLULU ETHICS COMMISSION 925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov
Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 - December 31, 2018) (Type or Print Clearly)

NAME (Last) (First) (Middle)	<u> </u>				
Field, Laurie Ann						
LOBBYIST FIRM/EMPLOY	R (if applicab	ie)		TELEPHONE		
N No () { L				808.954.4736		
MAILING ADDRESS (No. and Street or P.O Box)				FAX		
1350 S King Street, Ste. 309				FAAAU		
				EMAIL laurie fiel	d@ppvnh.org	
(City) Honolulu	(State)	-11		(Zip Code) 968	314	
PART II ORGANIZA						
NAME OF ORGANIZATION	YOU LOB	BY FOR (Do not a	abbreviate)	TELEPHONE		
Planned Parenthood Votes Nor	thwest and F	lawali		808.954.4736 FAX		
MAILING ADDRESS (No. a	nd Street o	P.O. Box)				
2001 East Madison St						
				EMAIL laurie.field	d@ppvnh.org	
(City) Seattle		(State) WA		(Zip Code) 98122		
		1				
PART III EXPENDIT	URES, I	BY TYPE				
Political Contributions				s, Meals, Food es	Amount	
Preparation & Distribution of Lobbying Materials				Advertising Amount		
Entertainment & Events Amount Other			Other □A	r □Additional Sheet(s) Attached		
	<u> </u>		TOTAL	Ø na		

Deadline: January 10th of Each Year NOTE: This is a public document

PART IV FEES, CO YOU RECEIVED FO					IEMBERSHIP FEES
Fees			Amount		
Compensation			Amount		
Contributions			Amount		
Membership Fees			Amount		
☐ Check here if additiona	l sheets	attached	D∕n/a		
PART V DESCRIPT	ION C	F SUBJECTS	ON WHICH	YOU LOI	BIED
☐Business & Economic Development		□Community Service		□Customer	
□Culture & Arts		□Housing		□Public Wo Sustainabilit	rks, Infrastructure & y
□Parks & Recreation		⊠ Public Health, Sal	fety & Welfare	□Tourism	
☐Transportation ☐Zoning & Planning			□ Specific Legislation: □ Additional Sheet(s) Attached Bill No. (Year) Reso No. Admin. Rule No. Dept.		
PART VI POLICY M					IGHT TO
1.	Outco		4.		Outcome:
2.	Outco	ne:	5.		Outcome:
3.	Outco	me:	☐ Additional Sheet(s) Attached		
PART VII LOBBYIS	T CEF	RTIFICATION			
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE DATE			By: (2)	OFFICIAL AUTHORI	ZED TO ADMINISTEN CATHS MATERIAL PUBLIC TO ADMINISTEN CATHS THE PUBLIC THE
Deadline: January 10 th of Each Year					

Rev 11/2018

Deadline: January 10th of Each Year NOTE: This is a public document

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"NOTARY PUBLIC CERTIFICATION					
ent Date:	1/10/2019	# pgs : 2			
Name:	C. Osurman	First Circuit			

Document Date: 1/10/2016

Notary Name: C. Osurman

Doc. Description: Honolulu

Hylics Commission 2018

10/2019 Date Notary Signature





925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		
FISHER, DUANE R.		
LOBBYIST FIRM/EMPLOYER	(if applicable)	TELEPHONE
STARN O'TOOLE MARCUS & FI	SHER	(808) 537-6100
MAILING ADDRESS (No. and	Street or P.O Box)	FAX (808) 537-5434
733 BISHOP STREET, SUITE 19	00	
		EMAIL dfisher@starnlaw.com
(City) HONOLULU	(State) HAWAII	(Zip Code) 96813

PART II ORGANIZATION			iii		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) TELEPHONE					
PARK HOTELS & RESORTS INC.	(571) 302-5757				
MAILING ADDRESS (No. and Stre	FAX				
1775 TYSONS BLVD., 7TH FLOOR					
		EMAIL			
(C;F)	(04-4-1)	/7: 0 1)			
(City) TYSONS	(State) VIRGINIA	(Zip Code) 22102			

Political Contributions	Amount 0	Receptions, Meals, Food & Beverages	Amount ₀	
Preparation & Distribution of Lobbying Materials	Amount 0	Media Advertising	Amount 0	
Entertainment & Events Amount 0		Other Additional Sheet(s) Attached		
		TOTAL \$32,713.92		

PART IV FEES, CO YOU RECEIVED FO					EMBERSHIP FEES
Fees			Amount 22,162.29		
Compensation			Amount		
Contributions	212		Amount		
Membership Fees			Amount		
☐ Check here if additiona	l sheets	attached	□ n/a		
PART V DESCRIPT	ION C	F SUBJECTS	ON WHICH	YOU LOI	BBIED
☐Business & Economic Development		□Community Servi		□Customer	
□Culture & Arts		□Housing		□Public Wo Sustainabilit	rks, Infrastructure & y
□Parks & Recreation		□Public Health, Sa	fety & Welfare	⊠Tourism	
□Transportation ☑Zoning		☑Zoning & Planning		■ Specific Legislation: □ Additional Sheet(s) Attached Bill No. 13 (Year) 2018 Reso No Admin. Rule No Dept	
□Other (indicate below):					
PART VI POLICY M INFLUENCE AND C					IGHT TO
1. BILL 13 (2018)	Outcor	ne:	4.		Outcome:
2.	Outcor		5.		Outcome:
3.	Outcor	ne:	☐ Additional	al Sheet(s) Attached	
PART VII LOBBYIS	T CFF	RTIFICATION			
I hereby certify that the foregoing statements are true and correct. During All LOBBYIST SIGNATURE		Subscribed and sworn to before me This 8th day of January 2019 By: Bunditte G. Lu NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS			
1-8-19 DATE			My commission expires: 6/29/2019		

2018 ANNUAL REPORT – DUANE R. FISHER

PART III EXPENDITURES, BY TYPE

Photocopying	\$	33.15
Scanning		5.70
City & County of Honolulu – Dept. of Planning & Permitting (charge for audio version of 2/7/18		
Planning Commission hearing)		15.00
Westlaw (research)		9.10
Conference call charges		52.82
The McClellan Group (consultant)	2	0,179.31
G70 (consultant)	12	2,418.84
TOTAL:	<u>\$32</u>	2,713.92

NOTARY CERTIFICATION STATEMEN	<u>VT</u>	
Doc. Date: <u>January 8, 2019</u> □ Undate	ed at time of notarization	
Document Description: Honolulu Ethics Co	ommission - 2018 Annual	
Report (Duane R. Fisher)		
No. of Pages: 4		
Jurisdiction: First Judicial Circuit		g 148,
Honolulu, Hawaii		4
Bundette a. Le	January 8, 2019	
Signature of Notary	Date of Notarization and	
BERNADETTE A. LEE	Certification Statement	
		(Official Stamp or Seal)
Printed Name of Notary		



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST		_
NAME (Last) (First) (Middle)		
FISHER, DUANE R.		
LOBBYIST FIRM/EMPLOYER	(if applicable)	TELEPHONE
STARN O'TOOLE MARCUS & F	SHER	(808) 537-6100
MAILING ADDRESS (No. and	Street or P.O Box)	FAX (808) 537-5434
733 BISHOP STREET, SUITE 19	000	
		EMAIL dflsher@starnlaw.com
(City) HONOLULU	(State) HAWAII	(Zip Code) 96813

PART II ORGANIZATIO	N		
NAME OF ORGANIZATION YOU	TELEPHONE		
TURTLE BAY RESORT, LLC	(808) 293-6000		
MAILING ADDRESS (No. and St	FAX		
57-091 KAMEHAMEHA HIGHWAY			
	EMAIL		
(City) KAHUKU	(State) HAWAII	(Zip Code) 96731	

PART III EXPENDIT	TURES, BY TYPE			
Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount	
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount	
		Other Additional Sheet(s Photocopying: \$11.33; Sta	Sheet(s) Attached 33; Staff support: \$49.80	
		TOTAL \$ 61.13		

PART IV FEES, CO YOU RECEIVED FO					EMBERSHIP FEES
Fees			Amount 1,347.67		
Compensation			Amount		
Contributions	. P.		Amount	T)	
Membership Fees			Amount		
☐ Check here if additiona	l sheets	attached	□ n/a		
PART V DESCRIPT	ION O	F SUBJECTS (ON WHICH	YOU LO	BBIED
⊠Business & Economic Development		□Community Service		□Customer	
□Culture & Arts		□Housing		□Public Wo Sustainabilit	rks, Infrastructure &
□Parks & Recreation		☑Public Health, Sat	fety & Welfare	⊠Tourism	
□Transportation 💌		⊠ Zoning & Planning		□ Specific Legislation: □ Additional Sheet(s) Attached Bill No(Year) Reso No Admin. Rule No Dept	
☐Other (indicate below):					
PART VI POLICY M INFLUENCE AND C					GHT TO
1.	Outcom		4.	,	Outcome:
2.	Outcom	ne:	5.		Outcome:
3.	Outcom	ne:	☐ Additional	al Sheet(s) Attached	
PART VII LOBBYIS	T CER	TIFICATION			
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE		Subscribed and sworn to before me This 8th day of January 3019. By: Augusti G. Lieuward Street Control of the		9 Lu	
1-8-19 DATE		My commission expires: $\frac{6/29/3019}{}$			

NOTARY CERTIFICATION STATEMENT
Doc. Date: January <u>&</u> , 2019 Undated at time of notarization
Document Description: Honolulu Ethics Commission - 2018 Annual
Report Form (Duane R. Fisher)
No. of Pages: 3
Jurisdiction: First Judicial Circuit
Honolulu, Hawaii
B. W. O. S. O. S. A. M.
Dunditte a. Ora January 8, 2019
Signature of Notary Date of Notarization and
Certification Statement
BERNADETTE A. LEE (Official Stamp or Seal)
Printed Name of Notary



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		
Fowler, Lisa		
LOBBYIST FIRM/EMPLOYER	(if applicable)	TELEPHONE
Hawaiian Humane Society		(808) 356-2242
MAILING ADDRESS (No. and Street or P.O Box)		FAX (808) 955-6034
2700 Waialae Avenue		
		EMAIL Ifowler@hawaiianhumane.org
(City) Honolulu	(State) Hawaii	(Zip Code) 96826

PART II ORGANIZATION					
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE			
Hawaiian Humane Society		(808) 356-2242			
MAILING ADDRESS (No. and Street or P.O. Box)		FAX (909) OFF 6024			
2700 Waialae Avenue		(808) 955-6034			
		EMAIL Ifowler@hawaiianhumane.org			
(City) Honolulu (State) Hawaii		(Zip Code) 96826			

PART III EXPENDIT	URES, BY TYPE			
Political Contributions	Amount 0	Receptions, Meals, Food & Beverages	Amount 0	
Preparation & Distribution of Lobbying Materials	Amount 0	Media Advertising	Amount 0	
Entertainment & Events	Amount 0	Other Additional Sheet(s) Attached		
		TOTAL 0		

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING					
Fees		Amount 0			
Compensation			Amount 0		
Contributions			Amount 0		
Membership Fees			Amount 0		
☐ Check here if additiona	l sheets	attached	⊠ n/a		
PART V DESCRIPT	ION C	F SUBJECTS	ON WHICH	YOU LO	BBIED
☐Business & Economic Development		□Community Service	ces	□Customer	Services
□Culture & Arts		□Housing		□Public Wo Sustainabilit	rks, Infrastructure & y
□Parks & Recreation		□Public Health, Sat	ety & Welfare	□Tourism	
☐Transportation ☐Zoning & Planning]	□ Specific Legislation: □ Additional Sheet(s) Attached Bill No(Year) Reso No Admin. Rule No Dept		
☑Other (indicate below):		Animal welfare and anii	mal services.		
PART VI POLICY M INFLUENCE AND C					GHT TO
1.2	Outcor		4.	1996u)	Outcome:
2.	Outcor	ne:	5.		Outcome:
3.	Outcor	ne:	☐ Additional Sheet(s) Attached		nched
PART VII LOBBYIS	T CER	RTIFICATION			
January 7, 2019 NOTARY PUBLIC CERTIFICATION DATE Dawn E. Kim First Judicial Circu Doc. Description: 2019 Annual			Down My commission July 25	y of Janua E. Kim E. Kim n expires: 2021	
Rev. 11/2018 No. of Pages: 2 Date Deagne: January 10 th of Each Year					

Notary Signature

Notary Signature

Notary Signature

Notary Signature

Notary Signature



925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768 Email: ethics@honolulu.gov Website: http://www.honolulu.gov/ethics/ THIS SPACE FOR OFFICE USE ONLY

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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		
FUKUHARA, TROY T.		
LOBBYIST FIRM/EMPLOYER	(if applicable)	TELEPHONE
CASTLE & COOKE HOMES HAV	WAII, INC.	(808) 548-4811
MAILING ADDRESS (No. and	Street or P.O Box)	FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		, ,
		EMAIL tfukuhara@castlecooke.com
(City) HONOLULU	(State)	(Zip Code) 96817

PART II ORGANIZATION				
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE		
CASTLE & COOKE HOMES HAWAII, INC	(808) 548-4811			
MAILING ADDRESS (No. and Street or P.O. Box)		FAX (808) 548-2975		
680 IWILEI ROAD, SUITE 510		, ,		
		EMAIL tfukuhara@castlecooke.com		
(City) HONOLULU (State)		(Zip Code) 96817		

PART III EXPENDITURES, BY TYPE					
	Amount 0.00	Receptions, Meals, Food & Beverages	Amount _{0.00}		
Preparation & Distribution of Lobbying Materials	Amount 0.00	Media Advertising	Amount 0.00		
Entertainment & Events	Amount 0.00	Other □Additional Sheet(s	Attached		
		TOTAL 0.00			

PART IV FEES, COI YOU RECEIVED FO					EMBERSHIP FEES
Fees		Amount 0,0	0		
Compensation		3	Amount 0.0	0	
Contributions			Amount 0.0	0	
Membership Fees			Amount 0.0	0	
☐ Check here if additiona	sheets	attached	⊠ n/a	R-2	
PART V DESCRIPT	ION O	F SUBJECTS (ON WHICH	YOU LOE	BBIED
■Business & Economic Development		□Community Service	ces	□Customer	Services
□Culture & Arts		⊠Housing		☑Public Wo Sustainability	rks, Infrastructure & /
□Parks & Recreation		□Public Health, Saf	ety & Welfare	□Tourism	
□Transportation	⊠Zoning & Planning		3	□ Specific Legislation: □ Additional Sheet(s) Attached Bill No(Year) Reso No Admin. Rule No Dept	
☐ Other (indicate below):		1			
PART VI POLICY M INFLUENCE AND O					GHT TO
1. None	Outcor		4.		Outcome:
2.	Outcor	ne:	5.		Outcome:
3.	Outcor	ne:	☐ Additional	l Sheet(s) Attached	
PART VII LOBBYIS	T CEF	RTIFICATION			MINIMAN MANAGER AND
I hereby certify that the foregoing statements are true and correct. LOEBYIST SIGNATURE DEC 13 2018 DATE		By: KYOKO PA	TOC, State of H	2018 C	



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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST			
NAME (Last) (First) (Middle)			
FUKUHARA, TROY T.			
LOBBYIST FIRM/EMPLOYER (if applicable)	TELEPHONE		
CASTLE & COOKE HOMES HAWAII, INC. (808) 548-4811			
MAILING ADDRESS (No. and Street or P.O Box) 680 IWILEI ROAD, SUITE 510	FAX (808) 548-2975		
	EMAIL tfukuhara@castlecooke.com		
(City) HONOLULU (State)	(Zip Code) 96817		

PART II ORGANIZATION				
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE		
CASTLE & COOKE PROPERTIES, INC.		(808) 548-4811		
MAILING ADDRESS (No. and Street or P.O. Box)		FAX (808) 548-2975		
680 IWILEI ROAD, SUITE 510				
		EMAIL tfukuhara@castlecooke.com		
(City) HONOLULU (State) HI		(Zip Code) 96817		

PART III EXPENDITURES, BY TYPE					
	Amount 0.00	Receptions, Meals, Food & Beverages	Amount _{0.00}		
Preparation & Distribution of Lobbying Materials	Amount 0.00	Media Advertising	Amount 0.00		
Entertainment & Events	Amount 0.00	Other □Additional Sheet(s) Attached			
		TOTAL 0.00			

PART IV FEES, COI YOU RECEIVED FO		-			EMBERSHIP FEES
Fees			Amount 0.0	00	
Compensation			Amount 0.0	0	
Contributions			Amount 0.0	0	
Membership Fees			Amount 0.0	0	
☐ Check here if additional	sheets	attached	⊠ n/a		
PART V DESCRIPT	ON C	F SUBJECTS (ON WHICH	YOU LOE	BBIED
		☐Community Service	ces	□Customer	Services
□Culture & Arts		⊠Housing		☑Public Wo Sustainability	rks, Infrastructure &
□ Parks & Recreation		□Public Health, Saf	ety & Welfare	□Tourism	
□Transportation		⊠Zoning & Planning	□ Specific Legislation: □ Additional Sheet(s) Attach Bill No(Year) Reso No Admin. Rule No Dept		nal Sheet(s) Attached(Year) No
□Other (indicate below):			300 000		
PART VI POLICY M INFLUENCE AND O					IGHT TO
1. None	Outcor		4.	·	Outcome:
2.	Outcor	ne:	5. Outcome:		Outcome:
3.	Outcor	me:	☐ Additional Sheet(s) Attached		
PART VII LOBBYIS	T CEF	RTIFICATION		·III	OKO PO MILL
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE DEC 1 3 2018 DATE		Subscribed and sworn to before me This		7 2018 Tawaii HAW	
			<u> </u>	<i>C</i> ;	NOTARY CERTIFICATION

HAWA Signature



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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		
FUKUHARA, TROY T.		
LOBBYIST FIRM/EMPLOYER	(if applicable)	TELEPHONE
CASTLE & COOKE HOMES HA	WAII, INC.	(808) 548-4811
MAILING ADDRESS (No. and	Street or P.O Box)	FAX (808) 548-2975
680 IWILEI ROAD, SUITE 510		
		EMAIL tfukuhara@castlecooke.com
(City) HONOLULU	(State)	(Zip Code) ₉₆₈₁₇

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOS	TELEPHONE		
CASTLE & COOKE, INC.		(808) 548-4811	
MAILING ADDRESS (No. and Street or P.O. Box)		FAX (808) 548-2975	
680 IWILEI ROAD, SUITE 510		` ′	
		EMAIL tfukuhara@castlecooke.com	
(City) HONOLULU	(State) HI	(Zip Code) 96817	

PART III EXPENDITURES, BY TYPE						
Political Contributions	Amount 0.00	Receptions, Meals, Food & Beverages	Amount _{0.00}			
Preparation & Distribution of Lobbying Materials	Amount 0.00	Media Advertising	Amount 0.00			
Entertainment & Events	Amount 0.00	Other □Additional Sheet(s) Attached			
		TOTAL 0.00				

PART IV FEES, COI YOU RECEIVED FO					EMBERSHIP FEES
Fees		Amount 0.0	00		
Compensation		Amount 0.0	Amount 0.00		
Contributions			Amount 0.0	0	
Membership Fees			Amount 0.0	0	
☐ Check here if additiona	sheets	attached	⊠ n/a		
PART V DESCRIPT	ION C	F SUBJECTS (ON WHICH	YOU LOE	BBIED
⊠ Business & Economic Development		□Community Service		□Customer	
☐ Culture & Arts		⊠Housing		☑Public Wo Sustainability	rks, Infrastructure &
□Parks & Recreation		□Public Health, Sat	fety & Welfare	□Tourism	
□Transportation		⊠Zoning & Planning		□ Specific Legislation: □ Additional Sheet(s) Attached Bill No(Year) Reso No Admin. Rule No Dept	
□Other (indicate below):					
PART VI POLICY M					GHT TO
1. None	Outcor		4.		Outcome:
2.	Outcor	ne:	5. Outcome:		Outcome:
3.	Outcor	ne:	☐ Additional Sheet(s) Attached		
PART VII LOBBYIS	T CEF	RTIFICATION			annumenta me
I hereby certify that the foregoing statements are true and correct. DEC 1 3 2018 DATE		By: Tole	TOC, State of I	2018 * . 0	

Deadline: January 10th of Each Yeav_{0.96}. NOTE: This is a public document.



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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 - December 31, 2018) (Type or Print Clearly)

PART I LOBBYIS	ST. TOLIUO HINNW NO	ET SELBUIG AS MODER ESEBO VITRAR
NAME (Last) (First) (Mid		and a second sec
Gaug, Kevan, Greg		
LOBBYIST FIRM/EMPL	OYER (if applicable)	TELEPHONE
Ulupono Initiative		(808) 544-8976
MAILING ADDRESS (N	o. and Street or P.O Box)	FAX
999 Bishop Street, Suite 12	202	
Barrier - Aller		EMAIL ggaug@ulupono.com
(City) Honolulu	(State) HI	(Zip Code) 96813
	100000000000000000000000000000000000000	

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LO	BBY FOR (Do not abbreviate)	TELEPHONE
Ulupono Initiative		(808) 544-8960
MAILING ADDRESS (No. and Street	or P.O. Box)	FAX
999 Bishop Street, Suite 1202		B) SERVICE OF CARY DONG (CO.)
annog li		EMAIL info@ulupono.com
(City) Honolulu	(State) HI	(Zip Code) 96813

PART III EXPENDIT	TURES, BY	TYPE			
Political Contributions	Amount	0	Receptions, Meals, Food & Beverages	Amount	0
Preparation & Distribution of Lobbying Materials	Amount	0	Media Advertising	Amount	0
Entertainment & Events	Amount	LANGE OF	Other □Additional Sheet	t(s) Attached	4
TO THE PARTY THE	-outeon		TOTAL	Motary Warner Mi	-0-

Deadline: January 10th of Each Year NOTE: This is a public document

PART IV FEES, CO YOU RECEIVED FO					EMBERSHIP FEES
Fees			Amount	radia) — unv Li spalle mari e	0
Compensation	Ting		Amount		0
Contributions		TROSES	Amount	a Strict	0
Membership Fees	. Ki	THE THE	Amount	n.l	Ð
☐ Check here if additiona	l sheets a	attached	n/a		
PART V DESCRIPT	ION OF	SUBJECTS	ON WHICH	YOU LOE	BBIED
☑Business & Economic Development		□Community Servi	ces	□Customer	Services
□Culture & Arts		⊠Housing		☑Public Wo Sustainability	rks, Infrastructure &
□Parks & Recreation		□Public Health, Sa	fety & Welfare	□Tourism	de table of the state of
⊠Transportation		⊠Zoning & Planning		□ Specific Legislation: □ Additional Sheet(s) Attached Bill No(Year) Reso No Admin. Rule No Dept	
PART VI POLICY MINFLUENCE AND C					IGHT TO
1.	Outcome		4.	<u></u>	Outcome:
2.	Outcom	e:	5. Outcor		Outcome:
3.	Outcome	e:	☐ Additional Sheet(s) Attached		
PART VII LOBBYIS	TCFR	TIFICATION	EIE-VIII	300	
I hereby certify that the fore and correct. Doc. Date: F	egoing state EB 0 1 20 e: Mirriam R otion 201	# Pages	My commission MIRRIAM R	OFFICIAL AUTHOR ON EXPIRES: 3/1. DOMINGO	ZY GANGTON R. DONNER DONNER NOTARY OF
Notary Signa Rev. 11/2018	ature III	Deadline Januar NOTENTH'S is a	y 10 th of Each Y public documer	ear nt	OF HAM



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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) (First) (Middle)		
Geminiani, Victor		
LOBBYIST FIRM/EMPLOYER (if applicable) TELEPHONE 808-227-3845		
Hawaii Appleseed Center for La	w and Economic Justice	
MAILING ADDRESS (No. and Street or P.O Box) 733 Bishop Street, Suite 1180		FAX
		EMAIL victor@hiappleseed.org
(City) Honolulu	(State)	(Zip Code) 96813

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBE	BY FOR (Do not abbreviate)	TELEPHONE
Hawaii Appleseed Center for Law and Econo	808-587-7605	
MAILING ADDRESS (No. and Street or 733 Bishop Street, Suite 1180	FAX	
	EMAIL info@hiappleseed.org	
(City) Honolulu	(State)	(Zip Code) 96813

PART III EXPENDIT	TURES, BY TYPE		
Political Contributions	Amount nla	Receptions, Meals, Food & Beverages	Amount n/a
Preparation & Distribution of Lobbying Materials	Amount n/a	Media Advertising	Amount n/a
Entertainment & Events	Amount n/a	Other Additional Sheet(s) Attached
		TOTAL O	

PART IV FEES, CO YOU RECEIVED FO					IEMBERSHIP FEES
Fees		Amount n/a			
Compensation		Amount \$1,692			
Contributions			Amount ^	la:	
Membership Fees			Amount n	la	
☐ Check here if additional sheets attached			□ n/a		
PART V DESCRIPT	ION C	F SUBJECTS	ON WHICH	YOU LO	BBIED
☐Business & Economic Development		□Community Service		□Customer	
□Culture & Arts		☑Housing		□Public Wo	orks, Infrastructure & y
□Parks & Recreation		□Public Health, Sat	fety & Welfare	□Tourism	
☐Transportation ■Zoning & Planning		□Specific Legislation: □ Additional Sheet(s) Attached Bill No(Year) Reso No. Admin. Rule No. Dept		nal Sheet(s) Attached(Year) No	
Other (indicate below): PART VI POLICY M	AKIN	G PROCESS D	ECISIONS	YOU SOL	IGHT TO
INFLUENCE AND C				assed)	
1. Bill 89 (2018)	Outcon det	feated	4.		Outcome:
2.	Outcon	ne:	5.		Outcome:
3.	Outcon	ne:	☐ Additional Sheet(s) Attached		
PART VII LOBBYIS	T CER	TIFICATION			
I hereby certify that the fore	going sta	ntements are true	Subscribed and sworn to before me		
LOBBYIST SIGNATURE DATE			This LUTH day of JANUARY 2019 JOHN JULIAN BY: JOHN JULIAN NOTARY OR ANY OFFICIAL AUTHORIZED SO ON THE STATE OF HAWAII NOTARY OR ANY OFFICIAL AUTHORIZED SO ON THE STATE OF		
/ Rev. 11/2018		Deadline: January			PUBLIC



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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST			
NAME (Last) (First) (Middle	e)		
Gill, Gary L.			
LOBBYIST FIRM/EMPLOYER (if applicable) Self/Gary Gill Consultant TELEPHONE 808 366-8950			
MAILING ADDRESS (No. 2465 Booth Rd.	and Street or P.O Box)	FAX None	
		EMAIL GaryLGill@gmail.com	
(City) Honolulu	(State) _{Hawaii}	(Zip Code) ₉₆₈₁₃	

PART II ORGANIZATION						
NAME OF ORGANIZATION YOU LOBE	TELEPHONE					
Sierra Club of Hawaii	538-6616					
MAILING ADDRESS (No. and Street or P.O. Box 2577	FAX					
	EMAIL HawaiiChapter@SierraClub.org					
(City) Honlulu	(State) Hawaii	(Zip Code) 96803				

Political Contributions	Amount	none	Receptions, Meals, Foo & Beverages	d Amount none
Preparation & Distribution of Lobbying Materials	Amount	none	Media Advertising	Amount none
Entertainment & Events	Amount	none	Other □Additional She	et(s) Attached
			TOTAL \$0	

Deadline: January 10th of Each Year NOTE: This is a public document

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING					
Fees		Amount no	ne		
Compensation		Amount no	Amount none		
Contributions			Amount no	ne	
Membership Fees			Amount no	ne	
☐ Check here if additional	sheets	attached	□ n/a		
PART V DESCRIPT	ON O	F SUBJECTS	ON WHICH	YOU LOE	BBIED
□Business & Economic Development		□Community Servi	ces	□Customer	Services
□Culture & Arts		□Housing		□Public Wo Sustainability	rks, Infrastructure &
□Parks & Recreation		□Public Health, Sat	fety & Welfare	□Tourism	
□Transportation □Zoning & Plant		⊡Zoning & Planning	☐ Specific Legislation: ☐ Additional Sheet(s) Attache Bill No(Year) Reso No Admin. Rule No Dept		nal Sheet(s) Attached(Year) No
□Other (indicate below):					
PART VI POLICY M INFLUENCE AND O					IGHT TO
		ne:	4.		Outcome:
2.	Outcor	ne:	5.		Outcome:
3.	Outcor	ne:	☐ Additional Sheet(s) Attached		
PART VII LOBBYIS	CEF	RTIFICATION	1	* ************************************	
I hereby certify that the foregoing statements are true and correct. NOTARY PUBLIC LOBBYIST SIGNATURE No. 06-339		Subscribed and sworn to before me This 25th day of February, 2019. By: NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS My commission expires:		1 ay . 20 19.	
DATE		E OF HAN	JUN 11 2022		

Doc. Date: 2/25/19 # Pages 2
Yangson Anzai First Circuit
Doc. Description Lobby 15t
Annual Report

Notary Signature Date

NOTARY PUBLIC No. 06-339

member and/o s = mi 373M



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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST			
NAME (Last) (First) (Middle)			
Gold Joy			
LOBBYIST FIRM/EMPLOYER	(if applicable)	TELEPHONE	
Joy Gold Unlimited, Inc.		808-368-1146	
MAILING ADDRESS (No. and	Street or P.O Box)	FAX	
PO Box 88555		CARALL	
		EMAIL joy@joygoldunlimited.com	
(City) Honolulu	(State) HI	(Zip Code) 96830	

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOB	TELEPHONE	
Dart Container Corporation	949-262-3255	
MAILING ADDRESS (No. and Street or	FAX	
4000 Barranca Parkway	EMAIL jonathan.choi@dart.biz	
(City) Irvine	(State) CA	(Zip Code) 92604

PART III EXPENDITURES, BY TYPE					
Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount		
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount		
Entertainment & Events	Amount	Other □Additional Sheet(s) Attached		
		TOTAL 0			

Deadline: January 10th of Each Year NOTE: This is a public document

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING					
Fees		Amount 4,974			
Compensation		Amount			
Contributions			Amount		
Membership Fees			Amount		
☐ Check here if additiona	sheets	attached	□ n/a		
PART V DESCRIPT	ION C	F SUBJECTS	ON WHICH	YOU LOI	BBIED
☐Business & Economic Development		□Community Servi		□Customer	
□Culture & Arts		□Housing		☑Public Wo	rks, Infrastructure &
□Parks & Recreation		□Public Health, Sa	fety & Welfare	□Tourism	
□Transportation □Zoning & Planning		9	□ Specific Legislation: □ Additional Sheet(s) Attached Bill No. 108,4,5,92 (Year) 2018 Reso No. 18-35 Admin. Rule No. Dept.		
□Other (indicate below):					
PART VI POLICY M					IGHT TO
		ne:	4. Bill 92		Outcome: Ongoing
2. Bill 4	Outcor	ne:	5. ₁₈₋₃₅		Outcome: Passed
3. _{Bill} 5	Outcor	ne:	☐ Additional Sheet(s) Attached		
PART VII LOBBYIS	T CEF	RTIFICATION			
I hereby certify that the foregoing statements are true and correct.		Subscribed and sworn to before me This day of anvary			
LOBBYIST SIGNATURE 1/7/19 DATE			By: JUSTIN ACIDO NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER DATHS My commission expires: 7 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
Rev. 11/2018		Deadline: January	/ 10 th of Each Y	ear	No. 18-401

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2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIS	ST			
NAME (Last) (First) (Mid	ddle)			
Gold Joy				
LOBBYIST FIRM/EMPL	OYER (if applicable)	TELEPHONE		
Joy Gold Unlimited, Inc.		808-368-1146		
MAILING ADDRESS (N	lo. and Street or P.O Box)	FAX		
PO Box 88555				
		EMAIL joy@joygoldunlimited.com		
(City) Honolulu	(State) HI	(Zip Code) 96830		

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOB	TELEPHONE	
KYD, Inc. dba: K. Yamada Distributors	808-836-7301	
MAILING ADDRESS (No. and Street or	FAX	
2949 Koapaka Street	EMAIL dy@kyd-inc.com	
(City) Honolulu	(State) HI	(Zip Code) 96819

PART III EXPENDITURES, BY TYPE						
Political Contributions	Amount	Receptions, Meals, Food & Beverages	Amount			
Preparation & Distribution of Lobbying Materials	Amount	Media Advertising	Amount			
Entertainment & Events	Amount	Other □Additional Sheet(s) Attached				
		TOTAL 0				

PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING						
Fees			Amount 4,976			
Compensation			Amount			
Contributions			Amount			
Membership Fees			Amount			
☐ Check here if additional sheets attached			□ n/a			
PART V DESCRIPTION	ON O	F SUBJECTS	ON WHICH	YOU LO	BBIED	
☐Business & Economic Development		□Community Services		□Customer Services		
☐Culture & Arts		□Housing		☑Public Works, Infrastructure & Sustainability		
□Parks & Recreation	□Parks & Recreation		□Public Health, Safety & Welfare		□Tourism	
□Transportation		□Zoning & Planning		□ Specific Legislation: □ Additional Sheet(s) Attached Bill No. 108,4,5,92 (Year) 2018 Reso No. 18-35 Admin. Rule No		
☐Other (indicate below):						
PART VI POLICY MAKING PROCESS DECISIONS YOU SOUGHT TO INFLUENCE AND OUTCOME (e.g., Bill X (2018), passed)						
1. pill 409			4. Bill 92		Outcome: ongoing	
2. _{Dill 4}	Outcome: Ongoing		5. ₁₈₋₃₅		Outcome: Passed	
3. _{Dill 5}	Outcome: Ongoing		☐ Additional Sheet(s) Attached			
PART VII LOBBYIST CERTIFICATION						
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE DATE			Subscribed and sworn to before me This day of			
Rev. 11/2018 Deadline: January 10 th of Each Year NOTE: This is a public document						



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HONOLULU ETHICS COMMISSION RECEIVED 971-14-19

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19 JAN -8 P12:58

2018 ANNUAL REPORT

Lobbyist Annual Report (January 1 – December 31, 2018) (Type or Print Clearly)

PART I LOBBYIST			
NAME (Last) (First) (Middle)			
Gold Joy			
LOBBYIST FIRM/EMPLOYER (if applicable)	TELEPHONE		
	808-368-1146		
Joy Gold Unlimited, Inc.			
MAILING ADDRESS (No. and Street or P.O Box)	FAX		
PO Box 88555			
1 O BOX 00000	EMAIL joy@joygoldunlimited.com		
(City) Honolulu (State)	(Zip Code) 96830		
Honolulu HI	33333		

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBE	TELEPHONE		
Meadow Gold Dairies	808-944-5911		
MAILING ADDRESS (No. and Street or	FAX		
925 Cedar Street			
Jozep Goddin Gill Gill		EMAIL john_erickson@deanfoods.com	
(City)	(State) HI	(Zip Code) 96814	

PART III EXPENDITURES, BY TYPE					
Political Contributions	Amount 0	Receptions, Meals, Food & Beverages	Amount 0		
Preparation & Distribution of Lobbying Materials Entertainment & Events	Amount ₀	Media Advertising	Amount 0		
	Amount 0	Other □Additional Sheet(s) Attached			
		TOTAL 0			

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PART IV FEES, COMPENSATION, CONTRIBUTIONS AND MEMBERSHIP FEES YOU RECEIVED FOR THE PURPOSE OF LOBBYING					
Fees			Amount 0		
Compensation			Amount 0		
Contributions			Amount 0		
Membership Fees			Amount 0		
☐ Check here if additional sheets attached			⊠ n/a		
PART V DESCRIPTI	ON O	F SUBJECTS	ON WHICH	YOU LOE	BIED
☐Business & Economic		□Community Service		□Customer Services	
Development ☐Culture & Arts		□Housing		□Public Works, Infrastructure & Sustainability	
□Parks & Recreation		□Public Health, Safety & Welfare		□Tourism	
□Transportation		□Zoning & Planning		□ Specific Legislation: □ Additional Sheet(s) Attached Bill No(Year) Reso No Admin. Rule No Dept	
□Other (indicate below):					
PART VI POLICY MA					GHT TO
		ne:	4.		Outcome:
2.	Outcon	me:	5.		Outcome:
3.	Outcome:		☐ Additional Sheet(s) Attached		
PART VII LOBBYIST CERTIFICATION					
I hereby certify that the foregoing statements are true and correct. LOBBYIST SIGNATURE			Subscribed and sworn to before me This day of		
DATE 1/7/19			My commission expires: 1 27 7 2 2 2		